| Case 18-23586-\ | /FP Doc 1 | Filed 07/06/18 | Entered 07/06/18 12:33:52 | Desc Main |
|--|--|---|--|--|
| Fill in this information to | identify your case: | Document P | age 1 of 52 | |
| United States Bankruptcy (| ourt for the: | | | |
| District of | II. | | | |
| Case number (# known): | | Chapter you are fi Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ling under: | |
| | | Onapter 13 | | Check if this is an amended filing |
| e bankruptcy forms use yo | tition fo | r Individua | one. A married couple may file a bankrup | uptcy 12/17 |
| btor 2 to distinguish between eperson must be Debtor | en them. In joint can in all of the formal | car. When information isses, one of the spouse: | is needed about the spouses separately, to must report information as Debtor 1 and | cy case together—called a m asks, "Do you own a car," he form uses <i>Debtor 1</i> and |
| | - C. C. O TOTAL | 9. | | |
| | | | | the other as Debtor 2. The |
| | as possible. If two needed, attach a se stion. | | g together, both are equally responsible for a continuous for the top of any additional pages, write | the other as Debtor 2. The |
| ormation. If more space is a known). Answer every ques | as possible. If two needed, attach a se stion. | married people are filing parate sheet to this form | | the other as <i>Debtor 2</i> . The or supplying correct e your name and case number |

Write the name that is on your government-issued picture identification (for example, First name your driver's license or passport). Middle name Middle name Bring your picture identification to your meeting with the trustee. Last name Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 First name years 44. First name Include your married or Middle name maiden names. Middle name Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of your Social Security number or federal OR Individual Taxpayer OR Identification number 9xx - xx(ITIN)

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| Debtor 1 First Name Middle | Neme Last Name | Case number (if known) |
|---|---|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer Identification Numbers (EIN) you have used in | have not used any business names or EINs. | ☐ I have not used any business names or EINs. |
| the last 8 years | Business name | Business name |
| Include trade names and doing business as names | Business name | Business name |
| | EIN | EIN — - — — — — — |
| | EIN | EIN |
| Where you live | | If Debtor 2 lives at a different address: |
| | 21-3CLIFTON Street | Number Street |
| | Newark NJ 07/14 City State ZIP Code | City State ZIP Code |
| | ESSEX | |
| | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | P.O. Box | P.O. Box |
| | City State ZIP Code | City State ZIP Code |
| Why you are choosing this district to file for | Check one: | Check one: |
| bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | |
| | | |

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Page 3 of 52 Document Debtor 1 Case number (# known) **Tell the Court About Your Bankruptcy Case** Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing Bankruptcy Code you for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. are choosing to file ☐ Chapter 7 under ☐ Chapter 11 Chapter 12 Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for bankruptcy within the last 8 years? When When Case number MM / DD / YYYY 10. Are any bankruptcy **™**No cases pending or being filed by a spouse who is Yes. Debtor not filing this case with Relationship to you you, or by a business When Case number, if known partner, or by an MM / DD / YYYY affiliate? Relationship to you District Case number, if known MM / DD / YYYY 11. Do you rent your Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you?

☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as

No. Go to line 12.

part of this bankruptcy petition.

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| Debtor 1 First Name Middle Ne | eme Last Name | Case number (if known) |
|---|---|--|
| Part 3: Report About Any I | Businesses You Own as a S | Sole Proprietor |
| 12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | ☐ Health Care Busine ☐ Single Asset Real I ☐ Stockbroker (as de | State ZIP Code e box to describe your business: ness (as defined in 11 U.S.C. § 101(27A)) Estate (as defined in 11 U.S.C. § 101(51B)) efined in 11 U.S.C. § 101(53A)) or (as defined in 11 U.S.C. § 101(6)) |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | most recent balance sheet, state any of these documents do not on the No. I am not filing under Chapte the Bankruptcy Code. | 11, the court must know whether you are a small business debtor so that it If you indicate that you are a small business debtor, you must attach your attement of operations, cash-flow statement, and federal income tax return or if t exist, follow the procedure in 11 U.S.C. § 1116(1)(B). Thapter 11. Iter 11, but I am NOT a small business debtor according to the definition in the |
| Part 4: Report if You Own o | or Have Any Hazardous Pro | operty or Any Property That Needs Immediate Attention |
| 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | Yes. What is the hazard? If immediate attention is | is needed, why is it needed? |
| | | City State ZIP Code |

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| Debtor 1 First Name Middle N | lame Last Name | | Case number (if known) | |
|--|--|---|--|---|
| Part 5: Explain Your Effor | rts to Receive a B | riefing About Credit Counseling | | |
| 15. Tell the court whether | About Debtor 1: | | About Debtor 2 (| Spouse Only in a Joint Case): |
| you have received a briefing about credit | You must check o | ne: | You must check o | ne: |
| The law requires that you receive a briefing about credit counseling before you file for | counseling ag | riefing from an approved credit gency within the 180 days before I kruptcy petition, and I received a completion. | counseling ag | riefing from an approved credit jency within the 180 days before i truptcy petition, and I received a completion. |
| bankruptcy. You must truthfully check one of the | Attach a copy of plan, if any, the | of the certificate and the payment at you developed with the agency. | Attach a copy of plan, if any, that | of the certificate and the payment at you developed with the agency. |
| following choices. If you cannot do so, you are not eligible to file. | counseling ag | riefing from an approved credit jency within the 180 days before I truptcy petition, but I do not have a completion. | counseling ag | iefing from an approved credit ency within the 180 days before I ruptcy petition, but I do not have completion. |
| If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors | Within 14 days you MUST file plan, if any. | after you file this bankruptcy petition, a copy of the certificate and payment | Within 14 days | after you file this bankruptcy petition a copy of the certificate and payment |
| can begin collection activities again. | services from unable to obta days after I ma | asked for credit counseling an approved agency, but was lin those services during the 7 ade my request, and exigent s merit a 30-day temporary waiver nent. | services from unable to obta days after I ma | asked for credit counseling an approved agency, but was in those services during the 7 ade my request, and exigent a merit a 30-day temporary waiver nent. |
| ë | requirement, at what efforts you you were unabl | day temporary waiver of the tach a separate sheet explaining a made to obtain the briefing, why le to obtain it before you filed for d what exigent circumstances file this case. | requirement, at what efforts you were unable | day temporary waiver of the tach a separate sheet explaining made to obtain the briefing, why e to obtain it before you filed for what exigent circumstances file this case. |
| | dissatisfied with briefing before y If the court is sa still receive a br You must file a agency, along w developed, if an may be dismiss Any extension of | be dismissed if the court is a your reasons for not receiving a you filed for bankruptcy. It is filed with your reasons, you must refing within 30 days after you file. Certificate from the approved with a copy of the payment plan you by. If you do not do so, your case ed. If the 30-day deadline is granted and is limited to a maximum of 15 | dissatisfied with briefing before y If the court is sa still receive a br You must file a agency, along w developed, if an may be dismiss Any extension of | be dismissed if the court is your reasons for not receiving a you filed for bankruptcy. tisfied with your reasons, you must iefing within 30 days after you file. certificate from the approved with a copy of the payment plan you y. If you do not do so, your case ed. If the 30-day deadline is granted not is limited to a maximum of 15 |
| | I am not require credit counseli | ed to receive a briefing about ng because of: | I am not require credit counseli | ed to receive a briefing about ng because of: |
| | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | ☐ Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | ☐ Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | Active duty. | I am currently on active military duty in a military combat zone. | ☐ Active duty. | I am currently on active military duty in a military combat zone. |
| | briefing about cr | u are not required to receive a edit counseling, you must file a r of credit counseling with the court. | briefing about cre | u are not required to receive a edit counseling, you must file a r of credit counseling with the court. |

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| D | ebtor 1 First Name Middle Na | me Lest Name | Case number (#known)_ | |
|-----|---|--|---|--|
| P | art 6: Answer These Que | estions for Reporting Purposes | | |
| 16 | . What kind of debts do | 16a. Are your debts primarily as "incurred by an individual p | consumer debts? Consumer debts ar rimarily for a personal, family, or househo | re defined in 11 U.S.C. § 101(8) |
| | you have? | No. Go to line 16b. Yes. Go to line 17. | , | |
| | | 16b. Are your debts primarily money for a business or invest | business debts? Business debts are of the business of the business debts are of the business debts are of the business debts. | debts that you incurred to obtain incurred to obtain |
| | | No. Go to line 16c. Yes. Go to line 17. | | |
| | | 16c. State the type of debts you ow | re that are not consumer debts or busines | s debts. |
| 17. | Are you filing under Chapter 7? | ☐ No. I am not filing under Chapte | er 7. Go to line 18. | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | administrative expenses and | . Do you estimate that after any exempt p re paid that funds will be available to distri | roperty is excluded and bute to unsecured creditors? |
| 18. | How many creditors do you estimate that you owe? | 73-1-49 50-99 100-199 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. | How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | □ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | rt 7: Sign Below | I have examined this petition, and I d correct. | declare under penalty of perjury that the ir | oformation provided is true and |
| | | If I have chosen to file under Chapter of title 11, United States Code. I under under Chapter 7. | r 7, I am aware that I may proceed, if elig erstand the relief available under each ch | ible, under Chapter 7, 11,12, or 13 apter, and I choose to proceed |
| | | If no attorney represents me and I did this document, I have obtained and re | d not pay or agree to pay someone who is ead the notice required by 11 U.S.C. § 34 | s not an attorney to help me fill out 12(b). |
| | | I understand making a false statemer | e chapter of title 11, United States Code, on the concealing property, or obtaining mone fines up to \$250,000, or imprisonment for 571. | ev or property by fraud in connection |
| | | 40 0 0 | Manso Signature of D. | ebtor 2 |
| | | Executed onMM / DD / YYYY | Executed on _ | MM / DD /YYYY |

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| Debtor 1 First Name Middle Nam | e Last Name Case | number (if known) |
|---|--|---|
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | I, the attorney for the debtor(s) named in this petition, declare to proceed under Chapter 7, 11, 12, or 13 of title 11, United 3 available under each chapter for which the person is eligible. the notice required by 11 U.S.C. § 342(b) and, in a case in w knowledge after an inquiry that the information in the schedu | States Code, and have explained the relief I also certify that I have delivered to the debtor(s) which § 707(b)(4)(D) applies, certify that I have no les filed with the petition is incorrect. Date MM / DD / YYYY |
| | PAUL GAUER ATTORNE 347 FRANKLIN STREET BLOOMFIELD, NJ 07003 Firm name (973) 743-7050 | |
| | PAUL GAUER ATTORNEY 347 FRANKLIN STREET BLOOMFIELD, NJ 07003 (973) 743-7050 | State ZIP Code |
| | O14 271 979 Bar number | Email address Gauer LAW Each. Com State |
| | | |

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| Fill in this in | formation to ident | ify your case: | 11.50 |
|---------------------|-------------------------|----------------|-------------|
| Debtor 1 | | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for th | ne: | District of |
| Case number | | | (State) |
| Outo Hallipel | (If known) | | |

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| your original forms, you must fill out a new Summary and check the box at the top of this page. | The second discount of the second sec |
|---|--|
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B 1b. Copy line 62, Total personal property, from Schedule A/B 1c. Copy line 63, Total of all property on Schedule A/B | · 1200 |
| Part 2: Summarize Your Liabilities | \$ 166 SO9 |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ + \$ |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | |
| | |

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| Debtor 1 First Name Middle Name Last Name | Case number (If known) |
|---|--|
| Part 4: Answer These Questions for Administrative and Statistical Reco | ords |
| 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit to the form. | his form to the court with your other schedules. |
| 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical primarily consumer debts. You have nothing to report on this this form to the court with your other schedules. | urposes. 28 U.S.C. § 159. |
| From the Statement of Your Current Monthly Income: Copy your total current monthly Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | y income from Official |
| 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | Total claim |
| From Part 4 on Schedule E/F, copy the following: | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | sO |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | sO |
| 9d. Student loans. (Copy line 6f.) | sO |
| Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | sO |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$ |
| 9g. Total. Add lines 9a through 9f. | s |

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| In this information to identify your case and this filing: Otor 1 |
|--|
| First Name Middle Name Last Name otor 2 puse, if filing) First Name Middle Name Last Name ted States Bankruptcy Court for the: District of (State) Check if this amended filing fficial Form 106A/B chedule A/B: Property acach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the eggry where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally |
| First Name Middle Name Last Name otor 2 puse, if filing) First Name Middle Name Last Name ted States Bankruptcy Court for the: District of (State) Check if this amended filing fficial Form 106A/B chedule A/B: Property acach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the eggry where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally |
| ted States Bankruptcy Court for the: District of (State) Check if this amended fill |
| Check if this amended fill amen |
| Check if this amended fill flicial Form 106A/B chedule A/B: Property ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the egory where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally |
| fficial Form 106A/B chedule A/B: Property ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the egory where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally |
| fficial Form 106A/B chedule A/B: Property ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the egory where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally |
| chedule A/B: Property ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the egory where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally |
| each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the egory where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally |
| egory where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally |
| ponsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional parties to the second secon |
| o you own or have any legal or equitable interest in any residence, building, land, or similar property? |
| No. Go to Part 2. |
| Yes. Where is the property? What is the property? Check all that apply. |
| 2 C1 - C4 C7 2 Single-family home the amount of any secured claims on School |
| Street address, if available, or other description Duplex or multi-unit building Creditors Who Have Claims Secured by Pro Condominium or cooperative Current value of the Current value |
| Condominium or cooperative Current value of the Current value Manufactured or mobile home entire property? portion you or |
| Land \$330,617 \$165,309 |
| Newark NJ 07// Investment property City State 7/D Code Timeshare Describe the nature of your ownersh |
| City State ZIP Code interest (such as fee simple, tenancy the entireties, or a life estate), if kno |
| Who has an interest in the property? Check one. |
| Debtor 1 only |
| County Debtor 2 only Debtor 2 only Check if this is community prope |
| At least one of the debtors and another (see instructions) |
| Other information you wish to add about this item, such as local |
| property identification number: you own or have more than one, list here: |
| What is the property? Check all that apply. Do not deduct secured claims or exemptions |
| Single-family home the amount of any secured claims on Schedu |
| Street address, if available, or other description |
| Concominium or cooperative Current value of the Current value of the portion you over the cooperative current value of the current value of the portion you over the cooperative current value of the |
| \$\$ |
| City State ZIP Code Timeshare Describe the nature of your ownersh |
| City State ZIP Code interest (such as fee simple, tenancy the entireties, or a life estate), if know |
| Who has an interest in the property? Check one. |
| Debtor 1 only |
| County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community proper |
| At least one of the debtors and another (see instructions) |
| Other information you wish to add about this item, such as local property identification number: |

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| ebtor 1 | | ddle Name Last Nar | Case number (| (if known) | <u>.</u> |
|-------------------------------------|--|---|--|--|--|
| 1.3. | Street address, if availa | ble, or other description | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Do not deduct secured of the amount of any security of the Creditors Who Have Cleen Current value of the entire property? | red claims on Schedu aims Secured by Prop |
| | City | State ZIP Code | = "" in the second in the seco | Describe the nature interest (such as fee the entireties, or a li | simple, tenancy |
| | County | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite | Check if this is c (see instructions) | ommunity proper |
| . 2. | Dosariha Varra | Wahiataa | | | |
| you o | Describe Your own, lease, or have leg | gal or equitable intere | est in any vehicles, whether they are registered or less also report it on Schedule G: Executory Contracts | not? Include any vehicle and Unexpired Leases. | s |
| own 1 | own, lease, or have legithat someone else drive | gal or equitable intere es. If you lease a vehic | ele, also report it on Schedule G: Executory Contracts | not? Include any vehicle and Unexpired Leases. | s |
| own fars, | wn, lease, or have legathat someone else driventations, trucks, tractors ones Make: Model: | gal or equitable intere es. If you lease a vehic | s, motorcycles Who has an interest in the property? Check one | not? Include any vehicle and Unexpired Leases. Do not deduct secured clathe amount of any secure Creditors Who Have Claim | aims or exemptions. d claims on <i>Schedu</i> l |
| own fars, | own, lease, or have legathat someone else drive vans, trucks, tractors es | gal or equitable intereses. If you lease a vehicles, sport utility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | and Unexpired Leases. Do not deduct secured clathe amount of any secure | aims or exemptions. d claims on <i>Schedu</i> l |
| ars, | wwn, lease, or have legathat someone else drive vans, trucks, tractors es Make: Model: Year: | gal or equitable intereses. If you lease a vehicles, sport utility vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured clathe amount of any secure Creditors Who Have Claim | aims or exemptions. d claims on Schedu ns Secured by Prop Current value o |
| you o own to ars, No Ye | wn, lease, or have legathat someone else driven vans, trucks, tractors of the session of the ses | gal or equitable intereses. If you lease a vehicles, sport utility vehicles PATA FINALLY 2000 200, 000 J | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? | aims or exemptions. d claims on Schedu ns Secured by Prop Current value of portion you ow |
| you o | wn, lease, or have legath at someone else driver vans, trucks, tractors of the session of the se | gal or equitable intereses. If you lease a vehicles, sport utility vehicles PATA FINALLY 2000 200, 000 J | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured clathe amount of any secure Creditors Who Have Claim Current value of the entire property? | aims or exemptions. d claims on Scheduns Secured by Prop Current value of portion you ow \$ / OO O ims or exemptions. d claims on Scheduli |
| you c | wn, lease, or have legath at someone else driver vans, trucks, tractors of the session of the se | gal or equitable intereses. If you lease a vehicles, sport utility vehicles PATA FINALLY 2000 200, 000 J | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured clathe amount of any secure. Current value of the entire property? \$ | aims or exemptions. d claims on Schedu ns Secured by Prop Current value of portion you ow \$ / OO O ims or exemptions. d claims on Schedul |

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| 3.3. | | | | |
|----------------|--|--|---|--|
| | Make: | Who has an interest in the property? Check one. | Do not deduct secured c | laims or exemptions. |
| | Model: | Debtor 1 only | the amount of any secure Creditors Who Have Class | ed claims on Scheduims Secured by Proc |
| , | Year: | Debtor 2 only | | |
| | Approximate mileage: | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Current value of the entire property? | Current value portion you or |
| | Other information: | At least one of the debtors and another | | • |
| | | ☐ Check if this is community property (see instructions) | \$ | \$ |
| 3.4. l | Make: | Who has an interest in the property? Check one. | Do not deduct secured cl | aims or exemptions |
| 1 | Model: | Debtor 1 only | the amount of any secure Creditors Who Have Clair | ed claims on Schedu |
| , | Year: | Debtor 2 only | | |
| , | Approximate mileage: | Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value portion you or |
| | Other information: | At least one of the debtors and another | ······································ | portion you o |
| | and mornidadii. | Check if this is community property (see instructions) | \$ | \$ |
| | flake:floodel: | Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured cla the amount of any secure Craditors Who Have Clair | d claims on Schedu |
| N Y | | _ | Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the entire property? | d claims on Scheduns Secured by Prop Current value |
| N Y | lodel: | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | the amount of any securer Creditors Who Have Clain Current value of the | d claims on Scheduns Secured by Prop Current value |
| M Y | lodel: | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | the amount of any secured Creditors Who Have Clain Current value of the entire property? | d claims on Scheduns Secured by Prop Current value portion you ov |
| Vou ov | fodel: fear: when ther information: | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured the amount of any se | d claims on Scheduns Secured by Prop Current value portion you ov \$ |
| you ov | flodel: fear: wher information: where infor | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | the amount of any secured Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clain | d claims on Scheduns Secured by Prop |
| Vou ov | fodel: fear: where information: wh | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? Do not deduct secured claim the amount of any secured Creditors Who Have Claim | d claims on Scheduns Secured by Prop Current value of portion you ow \$ |
| you ov | fodel: ther information: who or have more than one, list her take: odel: ear: | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Current value of the entire property? Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? | d claims on Scheduns Secured by Property Current value portion you own \$ |
| you ow 2. M | fodel: ther information: who or have more than one, list her take: odel: ear: | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ | d claims on Scheduns Secured by Property of Current value portion you over the secured by Property of Current value of Curren |

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| First Name N | iddle Name Last Name Case numb | DEF (if known) |
|--|--|---|
| Part 3: Describe Your | Personal and Household Items | |
| Allen we deland out the | al or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claim |
| 6. Household goods and fu | | or exemptions. |
| | s, furniture, linens, china, kitchenware | |
| No Voc Barrie | | |
| Yes. Describe | | s_100 |
| 7. Electronics | | |
| Examples: Televisions and collections; elec | radios; audio, video, stereo, and digital equipment; computers, printers, so tronic devices including cell phones, cameras, media players, games | canners; music |
| Yes. Describe | 71 | C0 |
| |) V | \$ |
| No Stamp, com, or t | urines; paintings, prints, or other artwork; books, pictures, or other art object paseball card collections; other collections, memorabilia, collectibles | cts; |
| Yes. Describe | | |
| S. Fautine 115 | | \$ |
| 9. Equipment for sports and Examples: Sports, photogra and kayaks; carp No | phic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs entry tools; musical instruments | |
| | | \$ |
| 10. Firearms Examples: Pistols, rifles, sho | tguns, ammunition, and related equipment | |
| Yes. Describe | | \$ |
| 11. Clothes | | |
| U No | furs, leather coats, designer wear, shoes, accessories | |
| Yes. Describe | | \$_50 |
| 12. Jewelry Examples: Everyday jewelry, gold, silver | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watc | ches, gems, |
| Yes. Describe | | \$ |
| 13. Non-farm animals Examples: Dogs, cats, birds, l | norses | Φ |
| No Yes. Describe | | |
| | sehold items you did not already list, including any health aids you di | \$s |
| No Yes. Give specific | , | |
| information | | \$ |
| Add the dollar value of all of for Part 3. Write that number | your entries from Part 3, including any entries for pages you have att | tached \$ 200 |
| | | |

Debtor 1

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| | any legal or equitable interest in | n any of the following? | Current value of the portion you own? Do not deduct secured claim or exemptions. |
|--|---|--|---|
| X No | | me, in a safe deposit box, and on hand when you file your petition | |
| Deposits of mone Examples: Checking | y ng, savings, or other financial acco | Cash: unts; certificates of deposit; shares in credit unions, brokerage houses, nultiple accounts with the same institution, list each. | * |
| Yes | | Institution name: | |
| | 17.1. Checking account: | : | \$ |
| | 17.2. Checking account: | | \$ |
| | 17.3. Savings account: | | \$ |
| | 17.4. Savings account: | | \$ |
| | 17.5. Certificates of deposit: | | \$ |
| | 17.6. Other financial account: | | \$ |
| | 17.7. Other financial account: | | \$ |
| | 17.8. Other financial account: | | \$ |
| | 17.9. Other financial account: | | \$ |
| onds, mutual fund camples: Bond fund No Yes | Institution or issuer name: | erage firms, money market accounts | ¢ |
| | | | |
| | | | \$ |
| on-publicly traded | d stock and interests in incorpora o, and joint venture Name of entity: | ated and unincorporated businesses, including an interest in % of ownership: | |

Debtor 1

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| | Middle Name | Last Name Case number (# known) | |
|---|--|--|--------------------------------------|
| Negotiable instrument | s include personal ch | other negotiable and non-negotiable instruments necks, cashiers' checks, promissory notes, and money orders. cannot transfer to someone by signing or delivering them. | |
| No Yes. Give specific information about them | Issuer name: | | \$ |
| | | | \$ \$ |
| 1. Retirement or pension Examples: Interests in No Yes. List each | | 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| account separately | . Type of account: | Institution name: | |
| | 401(k) or similar plan | n: | \$ |
| | Pension plan: | 0 | \$ |
| | IRA: | X | \$ |
| | Retirement account: | | \$ |
| | Keogh: | | \$ |
| | Additional account: | | \$ |
| | Additional account: | | \$ |
| Security deposits and Your share of all unused Examples: Agreements companies, or others | deposits you have | made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications | |
| | In | nstitution name or individual: | |
| No | In | stitution name or individual: | \$ |
| No | Electric: | stitution name or individual: | \$ \$ |
| No | Electric: Gas: Heating oil: | | \$ \$ \$ |
| No | Electric: Gas: Heating oil: | nstitution name or individual: | \$\$ \$\$ \$\$ |
| No | Electric: Gas: Heating oil: Security deposit on re | | \$\$ \$\$ \$\$ |
| No | Electric: Gas: Heating oil: Security deposit on re | | \$\$ \$\$ \$\$ |
| No | Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: | | \$\$ \$\$ \$\$ \$\$ |
| No | Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: | | \$\$ \$\$ \$\$ \$\$ |
| No Yes | Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other: | | \$\$\$\$\$\$\$\$ |
| No Yes Annuities (A contract for | Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other: | of money to you, either for life or for a number of years) | \$\$ \$\$ \$\$ \$\$ \$\$ |
| No Yes Annuities (A contract for | Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other: | of money to you, either for life or for a number of years) | \$\$ \$\$ \$\$ |

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| 24. Intercets in an education RA, in an account in a qualified ABLE program, or under a qualified state tuition program. 20 U.S.C. §§ 50(0)(x), 528A(D), and 529(b)(1). No | Debtor 1 First Name Middle Name Last Name | Case number (if known) | |
|--|--|--|-----------------------|
| Yes | 24. Interests in an education IRA, in an account in a qualifie 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | ed ABLE program, or under a qualified state tuition program | 1. |
| Separately file the records of any interests. 11 U.S.C. § 521(c): | No | | |
| \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | Yes | | |
| No Yes. Give specific information about them | Institution name and descrip | otion. Separately file the records of any interests.11 U.S.C. § 52 | 1(c): |
| No Yes. Give specific information about them | | | • |
| No Yes. Give specific information about them | | | \$ |
| No Yes. Give specific information about them | | | - \$ <u> </u> |
| See Side specific information about them | | | \$ |
| Yes. Give specific information about them | 25. Trusts, equitable or future interests in property (other the exercisable for your benefit | an anything listed in line 1), and rights or powers | |
| information about them | ™ No | | |
| information about them | Yes, Give specific | | |
| 28. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and icensing agreements No | information about them | | • |
| Examples: Internet domain names, websites, proceeds from royalties and licensing agreements Ves. Give specific information about them | | | 2 |
| information about them | Examples: Internet domain names, websites, proceeds from | r intellectual property royalties and licensing agreements | |
| 7. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No | Yes. Give specific | | |
| 7. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them | information about them | | \$ |
| Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No | | | |
| No Yes. Give specific information about them | Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative a | association holdings, liquor licenses, professional licenses | |
| information about them | | | |
| Ioney or property owed to you? Current value of th portion you own? Do not deduct secured claims or exemptions. I. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information. Alimony: Maintenance: Support: Support: Divorce settlement: Property settlement: Property settlement: Support: Sup | Yes. Give specific | | - |
| Current value of th portion you own? B. Tax refunds owed to you S. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years. State: Local: State: Local: State: Local: State: Local: State: Local: State: Local: Code: Code: | information about them | | \$ |
| Current value of th portion you own? Do not deduct secured dains or exemptions. No Yes. Give specific information about them, including whether you already filed the returns and the tax years. Federal: \$ | | | |
| Do not deduct secured claims or exemptions. 8. Tax refunds owed to you So Give specific information about them, including whether you already filed the returns and the tax years | loney or property owed to you? | | Current value of the |
| Alimony: Yes. Give specific information about them, including whether you already filed the returns and the tax years | | | |
| No Yes. Give specific information about them, including whether you already filed the returns and the tax years. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information | | | Do not deduct secured |
| Yes. Give specific information about them, including whether you already filed the returns and the tax years | B. Tax refunds owed to you | | dams of exemptions. |
| Yes. Give specific information about them, including whether you already filled the returns and the tax years | ST | | |
| about them, including whether you already filed the returns and the tax years | /2 | | |
| you already filed the returns and the tax years | about them, including whether | Federal: | \$ |
| Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information | you already filed the returns | State: | \$ |
| Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Alimony: Maintenance: Support: Divorce settlement: Property settlement: Property settlement: Property settlement: No Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information | and the tax years | | |
| Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No | | Local. | Φ |
| Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No | Family eupport | | |
| Yes. Give specific information | | sild account and the silver of | |
| Yes. Give specific information | No. | and support, maintenance, divorce settlement, property settleme | nt |
| Alimony: Maintenance: Support: Divorce settlement: Property settlement: Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information | | | |
| Maintenance: \$ Support: \$ Support: \$ Divorce settlement: \$ Property settlement: \$ Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information | Tes. Give specific information | | |
| Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information | | · | |
| Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information | | Maintenance: | \$ |
| Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information | | Support: | \$ |
| Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information | | Divorce settlement: | |
| Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information | | | \$ |
| Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information | Other amounts someone owes you | | |
| No Yes. Give specific information | Examples: Unpaid wages, disability insurance payments, disab | pility benefits, sick pay, vacation hav workers' compensation | |
| Yes. Give specific information | decidity benefits, unpaid toans you made to | someone else | |
| | | | |
| | ☐ Yes. Give specific information | | 1 |
| | | | \$ |

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| Debtor 1 | First Name | Middle Name | Last Name | Case number (if known) | |
|---------------------------------|-------------------------------|--|---|---|--|
| | | | rast Mania | | |
| = a | | | | | |
| 31. Interests | | | one, bankh an in | . (110.4) | |
| M No | i i icaiui, uis | ability, or life irisural | nce; nealth savings accoun | at (HSA); credit, homeowner's, or renter's insurance | |
| | | | | | |
| ☐ 1€S. N | ame me ins f each polic | surance company y and list its value | Company name: | Beneficiary: | Surrender or refund value |
| | | | | | ¢ |
| | | | | - | J |
| | | | | | _ \$ |
| 00. Amu into | -4 | | | | \$ |
| If you are t | he beneficia | erry that is due you ary of a living trust, e eone has died. | from someone who has expect proceeds from a life | died insurance policy, or are currently entitled to receive | |
| \mathcal{L} | ive enocific | information | | | |
| — 163. O | ive specific | intorniauon | | | \$ |
| | | | | | Ψ |
| 33. Claims aga Examples: | ainst third p Accidents, o | parties, whether or employment dispute | not you have filed a laws s, insurance claims, or righ | suit or made a demand for payment tts to sue | |
| | escribe each | o claim | | | |
| | | | | | \$ |
| 34. Other conti to set off c | ingent and laims | unliquidated claim | s of every nature, includi | ing counterclaims of the debtor and rights | |
| Yes. De | scribe each | claim | | | |
| | | | | | \$ |
| | | nformation | | | \$ |
| 6. Add the do for Pàrt 4. V | llar value o Vrite that n | f all of your entries umber here | from Part 4, including a | ny entries for pages you have attached | 0 |
| | | | | | |
| | | | | | |
| art 5: De | scribe A | ny Business-R | elated Property You | u Own or Have an Interest In. List any | real estate in Part 1 |
| | | | | | |
| | | ly legal or equitable | e interest in any busines: | s-related property? | |
| No. Go to | | | | | |
| ₩ Yes. Go | to line 38. | | | | |
| | | | | | Current value of the |
| | | | | | portion you own? |
| | | | | • | Do not deduct secured claims or exemptions. |
| . Accounts re | ceivable or | commissions you | already earned | | |
| ™ No | | | · | | |
| Yes. Des | cribe | | | | |
| | | | | | \$ |
| Office equip | ment, furni | shings, and suppli | es | | |
| Examples: Bus | iness-related | computers, software, r | modems, printers, copiers, fax | machines, rugs, telephones, desks, chairs, electronic devices | 3 |
| ₹ No | - | | | | |
| Yes. Des | cribe | | | | s |
| | 1 | | | | |

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| Debtor 1 | First Name | Middle Name | Lest Name | Case number (if known) | |
|----------------------|-----------------|-----------------------|--|--|--|
| | | | | | |
| 40. Machine i | ry, fixtures, o | equipment, suppi | ies you use in business | , and tools of your trade | |
| ₩ No | | | | • | |
| Yes. I | Describe | | | | |
| | - | | | | S |
| 1. Inventory | , | | | | |
| ∑ No | 1 | | | | |
| ☐ Yes. [| Describe | | | | \$ |
| | | | | | |
| _ | in partnersh | ips or joint ventu | res | | |
| <i>g</i> | Describe. | Name of entity: | | | |
| | | Name of entity: | | % of ownersh | ip: |
| | | | | % | \$ |
| | | | | % | \$ |
| | | | | % | Φ |
| Customer No | lists, mailin | g lists, or other c | ompilations | | |
| Yes. D | o your lists | include personal | v identifiable informatic | on (as defined in 11 U.S.C. § 101(41A))? | |
| | □ No | | | 77 (45 GOILLEG III 11 G.G.G. 9 101(41A)) 1 | |
| | Yes. Descr | ibe | | | |
| | | | | | \$ |
| Any busin | ess-related p | property you did | not already list | | |
| No No | | | - | | |
| Yes. Gi informa | ive specific | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |
| | | <u> </u> | | | ¢ |
| | | | | | 4 |
| Add the do | oliar value of | all of your entric | c from Bort E includion | any entries for pages you have attached | 3 |
| or Part 5. V | Write that nu | mber here | s nom Part 5, including | | \$ |
| | | | | | |
| Spall in | | | | | |
| t 6: De | escribe Any | / Farm- and Co | mmercial Fishing-Rel n farmland, list it in Part | lated Property You Own or Have an Interes | t In. |
| 4.73 | | ave all intelest ii | Tarmanu, list it in Part | 1. | |
| o you own | n or have any | / legal or equitab | le interest in any farm- c | or commercial fishing-related property? | |
| 🛂 No. Go t | to Part 7. | | | | |
| ■ res. Go | to line 47 | | | | |
| | | | | | Current value of the |
| | | | | | portion you own? Do not deduct secured claims |
| arm anima | | | | | or exemptions. |
| | ivestock, pou | ltry, farm-raised fis | sh . | | |
| No Yes | | | | | |
| . res | | | | | |
| | | | | | \$ |
| | | | | | |

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| Debtor 1 | First Name Middle Name Last Name | Case number (if known) | |
|-----------------------------|---|--|--------------------|
| ı | | | |
| 48. Crops—ei | ther growing or harvested | | |
| Yes. G | ive specific | | |
| Į. | ation | | \$ |
| D No | fishing equipment, implements, machinery, fixtu | ires, and tools of trade | |
| Yes | | | |
| 50 Form and 6 | | | \$ |
| No No | ishing supplies, chemicals, and feed | | |
| 1 Yes | | | |
| | | | \$ |
| No No | and commercial fishing-related property you did | not already list | |
| | ve specific | | |
| 52 Add the do | llar value of all of your ontrine from Day C | | \$ |
| for Part 6. V | llar value of all of your entries from Part 6, inclu Nrite that number here | orng any entries for pages you have attached | \$ |
| | | • | serV 40 |
| Part 7: De | escribe All Property You Own or Have | an Interest in That You Did Not List Abo | ve |
| 53. Do you have | e other property of any kind you did not already | list? | |
| 전 No | ason tickets, country club membership | | |
| Yes. Given information | e specific on | | \$ |
| | | | \$s |
| 54 Add the dell | | | |
| O4. Add the don | ar value of all of your entries from Part 7. Write | that number here | \$ |
| Part 8: Lis | et the Totals of Each Part of this Form | • | |
| | | | 1660.0 |
| | real estate, line 2 | • | → \$165,309 |
| 56. Part 2: Total | | \$ | - |
| | personal and household items, line 15 | \$ | |
| | financial assets, line 36 | \$ | |
| 59. Part 5: Total (| business-related property, line 45 | \$ O | |
| 60. Part 6: Total f | farm- and fishing-related property, line 52 | \$ <i>0</i> | |
| 61. Part 7: Total o | other property not listed, line 54 | +\$0 | i |
| 32. Total person a | al property. Add lines 56 through 61 | \$ 1200 Copy personal property total | → +s_1200 |
| 3. Total of all pr o | operty on Schedule A/B. Add line 55 + line 62 | | s 166 5 6 9 |
| | | | |

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| Fill in this information to identify your case: | The Deal | | |
|--|--|---|--|
| Debtor 1 First Name Middle Nam | A Lest Nove | | |
| Debtor 2 | - Lust Hairib | | |
| United States Bankruptcy Court for the: | Last Mario | | |
| Case number | District o | (State) | _ |
| (If known) | | | Check if this is amended filing |
| Official Form 106C | | | |
| Schedule C: The Pro | perty You | Claim as Exemp | t 12/15 |
| Using the property you listed on Schedule A/B: Prespace is needed, fill out and attach to this page as your name and case number (if known). For each item of property you claim as exempt | s many copies of Part 2: | Additional Page as necessary. On the top | of any additional pages, write |
| specific dollar amount as exempt. Alternatively of any applicable statutory limit. Some exempt etirement funds—may be unlimited in dollar a | mount. However. if vol | I claim an exemption of 100% of fair m | arkot volus under a leur that |
| etirement funds—may be unlimited in dollar a mits the exemption to a particular dollar amout ould be limited to the applicable statutory am Part 1: Identify the Property You Claim 1. Which set of exemptions are you claiming | mount. However, if you unt and the value of the lount. m as Exempt Check one only, even to | claim an exemption of 100% of fair mage property is determined to exceed that the property is determined to exceed that the property is filling with you. | arkot vojuo undos a Jase that |
| etirement funds—may be unlimited in dollar a imits the exemption to a particular dollar amount to the exemption to a particular dollar amount be limited to the applicable statutory amplicable statutory statuto | mount. However, if you unt and the value of the lount. m as Exempt Check one only, even in horseptoys. 11 | claim an exemption of 100% of fair mage property is determined to exceed that the property is determined to exceed that the property is filling with you. | arkot volus under a laur that |
| etirement funds—may be unlimited in dollar a imits the exemption to a particular dollar amouvould be limited to the applicable statutory am Part 1: Identify the Property You Clair Which set of exemptions are you claiming You are claiming state and federal nonbar | mount. However, if you unt and the value of the lount. m as Exempt 7 Check one only, even and the lount. U.S.C. § 522(b)(2) | is claim an exemption of 100% of fair many property is determined to exceed that it is property is determined to exceed that it is property is determined to exceed that it is property if your spouse is filing with you. U.S.C. § 522(b)(3) | arkot volus under a leur that |
| etirement funds—may be unlimited in dollar a imits the exemption to a particular dollar amouvould be limited to the applicable statutory am Part 1: Identify the Property You Clair Which set of exemptions are you claiming You are claiming state and federal nonbar | mount. However, if you unt and the value of the lount. m as Exempt 7 Check one only, even and the lount. U.S.C. § 522(b)(2) | is claim an exemption of 100% of fair many property is determined to exceed that it is property is determined to exceed that it is property is determined to exceed that it is property if your spouse is filing with you. U.S.C. § 522(b)(3) | arket value under a law that t amount, your exemption |
| etirement funds—may be unlimited in dollar a imits the exemption to a particular dollar amove ould be limited to the applicable statutory amplicable statuto | mount. However, if you unt and the value of the rount. m as Exempt Check one only, even a nkruptcy exemptions. 11 U.S.C. § 522(b)(2) that you claim as exem | e property is determined to exceed that property is determined to exceed that if your spouse is filing with you. U.S.C. § 522(b)(3) | arkot volus under a leur that |
| Part 1: Identify the Property You Claim 1. Which set of exemptions are you claiming. 1. You are claiming state and federal nonbal You are claiming federal exemptions. 11 is any property you list on Schedule A/B that lists this property. | mount. However, if you unt and the value of the lount. m as Exempt Check one only, even to have the lount. Check one only, even to have the lount. Check one only, even to have the lount. Current value of the portion you own Copy the value from Schedule A/B | if your spouse is filing with you. U.S.C. § 522(b)(3) Amount of the exemption you claim Check only one box for each exemption. | arket value under a law that t amount, your exemption |
| Part 1: Identify the Property You Claim Which set of exemptions are you claiming. You are claiming state and federal nonbar you are claiming federal exemptions. 11 For any property you list on Schedule A/B that lists this property. | mount. However, if you unt and the value of the lount. m as Exempt Check one only, even to have the lount. Check one only, even to have the lount. Check one only, even to have the lount. Current value of the portion you own Copy the value from Schedule A/B | is claim an exemption of 100% of fair many property is determined to exceed that if your spouse is filing with you. U.S.C. § 522(b)(3) Amount of the exemption you claim | arket value under a law that t amount, your exemption |
| Part 1: Identify the Property You Claim 1. Which set of exemptions are you claiming the you are claiming state and federal nonbal You are claiming federal exemptions. 11 2. For any property you list on Schedule A/B that lists this property Brief description: 2. CL. Fin N.S. 2. Brief description: Line from 1. | mount. However, if you unt and the value of the lount. m as Exempt Check one only, even to have the lount. Check one only, even to have the lount. Check one only, even to have the lount. Current value of the portion you own Copy the value from Schedule A/B | if your spouse is filing with you. U.S.C. § 522(b)(3) Amount of the exemption you claim Check only one box for each exemption. | arket value under a law that t amount, your exemption |
| Part 1: Identify the Property You Claim 1. Which set of exemptions are you claiming the description of the property You Claim 2. For any property you list on Schedule A/B that lists this property Brief description: Line from Schedule A/B: Brief | mount. However, if you unt and the value of the lount. m as Exempt Check one only, even to have the lount. Check one only, even to have the lount. Check one only, even to have the lount. Current value of the portion you own Copy the value from Schedule A/B | if your spouse is filing with you. U.S.C. § 522(b)(3) Amount of the exemption you claim Check only one box for each exemption. \$ | arket value under a law that t amount, your exemption |
| Part 1: Identify the Property You Claim 1. Which set of exemptions are you claiming You are claiming state and federal nonbal You are claiming federal exemptions. 11 2. For any property you list on Schedule A/B that lists this property Brief description: Line from Schedule A/B: Brief description: Line from Schedule A/B: Line from | mount. However, if you unt and the value of the lount. m as Exempt Check one only, even to have the lount. Check one only, even to have the lount. Check one only, even to have the lount. Current value of the portion you own Copy the value from Schedule A/B | claim an exemption of 100% of fair make property is determined to exceed that property is determined to exceed that if your spouse is filing with you. U.S.C. § 522(b)(3) Amount of the exemption you claim Check only one box for each exemption. \$ | arket value under a law that t amount, your exemption |

3. Are you claiming a homestead exemption of more than \$155,675?

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

No.

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

Yes

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| Debtor 1 | | Case number (if known) | |
|---|--------------------------------------|--|------------------------------------|
| First Name Middle Name Last | Name | Sase namber (ii known) | |
| Part 2: Additional Page | | | |
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief 2010 N.SCAN Pathfind | ers 1000 | □ s | |
| Line from School A/R: | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: Householdgoods + Curv | Shings \$ 100 | □ \$ | |
| Line from Schedule A/B: 3,5 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | s 50 | \(\) \$ | |
| Line from 3,7 Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| Brief CLothes description: | s_50 | □ s. | |
| Line from 3.1 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | _ \$ | |
| Line from Schedule A/B: ——— | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | □ \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | □ \$ | |
| Line from Schedule A/B: | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | □ \$ | |
| Line from Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | □ \$ | |
| Line from Schedule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ | - \$ | |
| Line from Schedule A/B: | | □ :- | = |
| Brief description: | \$ | - \$ | |
| Line from Schedule A/B: | | 100% of fair market value, up to | |

description:

Line from Schedule A/B:

Brief

□\$

☐ 100% of fair market value, up to

any applicable statutory limit

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| Fill in this information to identify your ca | se: | | | |
|--|--|--|--------------------------|-------------------|
| Betterd | | | | |
| Debtor 1 First Name Middle | Name Last Name | | | |
| Debtor 2 | | | | |
| (Spouse, if filing) First Name Middle | Name Lest Name | | | |
| United States Bankruptcy Court for the: | District of | | | |
| Case number(f known) | | | | |
| (II KIROWII) | | | Check i | |
| | | | amende | au ming |
| Official Form 106D | | | | |
| Schedule D. Creditor | c Who Hove Claims Sasser | ad bar Daras | 4 | |
| | s Who Have Claims Secur | | | 12/15 |
| Be as complete and accurate as possible | If two married people are filing together, both are ed | qually responsible fo | r supplying correct | 1 |
| additional pages, write your name and car | y the Additional Page, fill it out, number the entries, se number (if known). | and attach it to this | form. On the top of | any |
| | , | | | |
| 1. Do any creditors have claims secured by | y your property? | | | |
| Yes. Fill in all of the information below. | n to the court with your other schedules. You have nothi | ng else to report on the | nis form. | |
| ros. rain and the information below. | | | | |
| Part 1: List All Secured Claims | | | | |
| | | Column A | Column B | Column C |
| List all secured claims. If a creditor has no for each claim. If more than one creditor has no control of the control of | nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. | Amount of claim | Value of collateral | Unsecured |
| As much as possible, list the claims in alph | abetical order according to the creditor's name. | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 Selene, Finance, 19 | Decade the property that are your thanks | במו נוכחה | | II dily |
| Creditor's Name | Describe the property that secures the claim: | \$281,003,70 | \$ | |
| 9990 RICHMOND AVENUE | arcyftons) | | | |
| Number Street | Newark | ļ | | |
| Suite 400 South | As of the date you file, the claim is: Check all that apply. Contingent Condition Con | | | |
| Houston, IX 77042 | Unliquidated Servicer for FNMA | • | | |
| City State ZIP Code | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only Debtor 2 only | An agreement you made (such as mortgage)or secured | | 1 | |
| Debtor 1 and Debtor 2 only | car loan) Statutory lien (such as tax lien, mechanic's lien) | | , | |
| At least one of the debtors and another | Judgment lien from a tawsuit | | | |
| ☐ Check if this claim relates to a | Other (including a right to offset) | | | |
| community debt | Or A 11- 101 | 13 | | |
| Date debt was incurred | Last 4 digits of account number 80 416 | 70 | | |
| Creditor's Name | Describe the property that secures the claim: | \$ | \$\$ | |
| 0.00.00 | | | | |
| Number Street | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | ☐ Contingent ☐ Unliquidated | | | |
| City State ZIP Code | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | An agreement you made (such as mortgage or secured | | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | car loan) Statutory lien (such as tax lien, mechanic's lien) | | | |
| At least one of the debtors and another | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a | Other (including a right to offset) | | | |
| community debt | | | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| Add the dollar value of your entries in C | olumn A on this page. Write that number here: | . 1 | | |

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| Debtor 1 | First Name Middle Name Last N | lame | Case number (if known) |
|---------------------------|---|---|--|
| Part 2: | List Others to Be Notified for | | Listed |
| you have be notified Name | age only if you have others to be notific trying to collect from you for a debt you more than one creditor for any of the del for any debts in Part 1, do not fill out of the delegant of the | ed about your bankruptcy for a u owe to someone else, list the | a debt that you already listed in Part 1. For example, if a collection a creditor in Part 1, and then list the collection agency here. Similarly, if st the additional creditors here. If you do not have additional persons to On which line in Part 1 did you enter the creditor? |
| | | | On which line in Part 1 did you enter the creditor? |
| Name | | | Last 4 digits of account number |
| Number | Street | | |
| | | | |
| City | Sta | te ZIP Code | |
| | | | On which line in Part 1 dld you enter the creditor? |
| Name | | | Last 4 digits of account number |
| Number | Street | | |
| | | | |
| City | Stat | te ZIP Code | |
| Name | | | On which line in Part 1 did you enter the creditor? |
| rume | | | Last 4 digits of account number |
| Number | Street | | |
| | |) | |
| City | State | e ZIP Code | |
| Name | | | On which line in Part 1 did you enter the creditor? |
| Manh | | | Last 4 digits of account number |
| Number | Street | | |
| 0" | | | |
| City | State | ZIP Code | |
| Name | | | On which line in Part 1 did you enter the creditor? Last 4 digits of account number |
| Number | Street | | augus or account flumper |
| - ACTION | Ouedl | | |
| City | | | |
| Oity | State | ZIP Code | |

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| Fill in this information to identify yo | ur case: | | ĺ | | | |
|--|----------------------|--|--|------------------|----------------------------------|-------------------|
| Debtor 1 | | | = | | | |
| First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Lest Name | | | | |
| United States Bankruptcy Court for the: | | District of | | | | |
| | | (State) | | | ☐ Che | eck if this is an |
| Case number (If known) | | | | | | ended filing |
| Official Form 106E/F | | | ** | | | |
| Schedule E/F: Cred | itore W | lho Havo Uncoo | ared Cleic | | | |
| | | | | | | 12/15 |
| Be as complete and accurate as possi List the other party to any executory of | contracts or u | nexpired leases that could result | lina claim Also I | et avacutary a | antracte an G | Sahadula |
| AVD: Property (Umicial Form 105A/B) a | ına on Schedi | ile G: Executory Contracts and I | Inevnired I escee | Official Form 1 | OCC) Do not | inalizata anic |
| creditors with partially secured claims needed, copy the Part you need, fill it | s tnat are liste | a in Schedule D: Creditors Who . | Have Claime Secu | red by Propert | / If more one | oo io |
| any additional pages, write your name | and case nui | nber (if known). | in Atmon the Cont | illuation raye | o uns page. | On the top of |
| Part 1: List All of Your PRIORIT | TY Unsecure | ed Claims | | | | |
| Do any creditors have priority unse | ecured claims | against you? | | | | |
| No. Go to Part 2. | | agamet you : | | | | |
| Yes. | | | | | | |
| 2. List all of your priority unsecured | claims. If a cre | ditor has more than one priority un | secured claim, list t | he creditor sepa | rately for eac | h claim. For |
| each claim listed, identify what type o nonpriority amounts. As much as pos | of Claim It is. It a | I claim has both priority and nonnri | ority amounte liet th | at claim here o | ad about both | meionibe and |
| unsecured claims, fill out the Continua | ation Page of F | Part 1. If more than one creditor hol | ng to the creditor's h lds a particular clain | name. If you hav | e more than t creditors in Pa | wo priority |
| (For an explanation of each type of cla | aim, see the in | structions for this form in the instru | ction booklet.) | | | |
| | | | | Total claim | Priority | Nonpriority |
| 2.1 | | | | | amount | amount |
| Priority Creditor's Name | | Last 4 digits of account number | | \$ | \$ | \$ |
| Phoney Creditor's Name | | When was the debt incurred? | | | | |
| Number Street | | THE THE STATE OF T | | | | |
| | | As of the date you file, the claim i | is: Check all that apply | <i>f</i> . | | |
| City State | ZIP Code | ☐ Contingent | | | | |
| Who incurred the debt? Check one. | 211 0000 | Unliquidated | | | | |
| Debtor 1 only | | ☐ Disputed | | | | |
| Debtor 2 only | | Type of PRIORITY unsecured ci | laim: | | | |
| Debtor 1 and Debtor 2 only | | Domestic support obligations | | | | |
| At least one of the debtors and another | | ☐ Taxes and certain other debts you | owe the government | | | |
| Check if this claim is for a comm | unity debt | Claims for death or personal injury | | | | |
| Is the claim subject to offset? | | intoxicated | | | | |
| □ No □ Yes | | Other. Specify | | | | |
| 2.2 | | | | | | |
| Priority Creditor's Name | | Last 4 digits of account number _ | | \$ | \$ | \$ |
| | | When was the debt incurred? | | | | |
| Number Street | | As of the date was file the status to | | | | |
| | | As of the date you file, the claim is | s: Check all that apply. | | | |
| City State 2 | ZIP Code | ☐ Contingent ☐ Unliquidated | | | | |
| Who incurred the debt? Check one. | | ☐ Disputed | | | | |
| Debtor 1 only | | | | | | |
| Debtor 2 only | | Type of PRIORITY unsecured cla | aim: | | | |
| Debtor 1 and Debtor 2 only | | Domestic support obligations | - | | | |
| At least one of the debtors and another | | Taxes and certain other debts you | | | | |
| Check if this claim is for a community | inity debt | Claims for death or personal injury intoxicated | while you were | | | |

□ No □ Yes

Is the claim subject to offset?

Other. Specify_

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| Debtor 1 | First Name Mix | idle Name L | est Name | Case number (# known) |
|-----------|-----------------------|--|------------------|---|
| Part 3: | List Others to | Be Notified Ab | out a Debt Th | at You Already Listed |
| 2, then I | ist the collection a | igency is trying t agency here. Sii | o collect from y | t your bankruptcy, for a debt that you already listed in Parts 1 or 2. For you for a debt you owe to someone else, list the original creditor in Parts 1 or you more than one creditor for any of the debts that you listed in Parts 1 or 2, list the sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. |
| Name | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number | Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Nomber | 38661 | | | ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| City | | State | ZIP Code | Last 4 digits of account number |
| Name | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured |
| City | | | | Last 4 digits of account number |
| City | | State | ZIP Code | |
| Name | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Number | Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| City | | State | ZIP Code | Last 4 digits of account number |
| Name | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | ☐ Part 2: Creditors with Nonpriority Unsecured Claims |
| City | | State | ZIP Code | Last 4 digits of account number |
| Name | CONTRACTOR AND PARTY. | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| rvanio | | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured |
| City | | State | ZiP Code | Last 4 digits of account number |
| | | Sidle | ZIP Code | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name | | | | |
| Number | Street | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| City | | State | ZIP Code | Last 4 digits of account number |
| Name | | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Marine | Steen ! | | | Line of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| City | | State | ZIP Code | Last 4 digits of account number |
| | | 0.010 | 0000 | |

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| Debtor 1 | First Name Middle Name Last Name | | Case number (if known) |
|----------------------|---|----------|---|
| Part 4: | Add the Amounts for Each Type of Unsecured Claim | n | |
| 6. Total the Add the | amounts of certain types of unsecured claims. This information amounts for each type of unsecured claim. | mation i | s for statistical reporting purposes only. 28 U.S.C. § 159. |
| | | | Total claim |
| Total claims | 6a. Domestic support obligations | 6a. | sO |
| from Part 1 | 6b. Taxes and certain other debts you owe the government | 6b. | sO |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$O |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | +\$ |
| | 6e. Total. Add lines 6a through 6d. | 6e. | <u>\$</u> |
| | | | Total claim |
| Total claims | 6f. Student loans | 6f. | s (C) |
| from Part 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | sO |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | s |
| | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i | + <u>\$</u> |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$ |

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| Debtor | | | |
|---------------------------|----------------------|-------------|-------------|
| - | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse If filing) | First Name | Middle Name | Last Name |
| Jnited States E | Bankruptcy Court for | the: | District of |
| 0 | | | (State) |
| Case number (If known) | | | |

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person o | or company wi | ith whom you | I have the contract or lease | State what the contract or lease is for |
|-----|----------|---|--------------|------------------------------|--|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | • | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | - |
| 2.3 | City | Book teoretiste erakette en anterior de en anterior | State | ZIP Code | teriori (Shipmandor in millo Aparipapina). |
| | Name | | | | |
| | Number | Street | | | =- |
| -7 | City | inter . | State | ZIP Code | CONTRACTOR OF I WATE STREET, IN STREET |
| 2.4 | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| 2.5 | City | | State | ZIP Code | cas |
| F-1 | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |

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| De | ebtor 1 | First Name | Middle Name | Last Name | | Case number (# known) | |
|-------|---------|------------|---------------|-------------------|------------------|-----------------------------------|--|
| N | re. | Additional | Page if You I | lave More Cont | racts or Leases | | |
| 1 | Perso | | | u have the contra | | What the contract or lease is for | |
| 2. | _ | | | | Periode Miller N | What the contract of lease is log | |
| - | Name | | | | | ± , | |
| | Numbe | r Street | | | | _ | |
| | City | | State | ZIP Code | | = | |
| 2. | | | | | | | |
| | Name | | | | | - | |
| | Number | Street | | | | = | |
| | City | | State | ZIP Code | | | |
| 2 | | | | | 9,111 | | |
| | Name | | | | | - | |
| | Number | Street | | | | - | |
| | City | | State | ZIP Code | | - | |
| 2 | | | | | | | |
| | Name | | | | | | |
| | Number | Street | | | | | |
| | City | | State | ZIP Code | | | |
| 2 | | | | | | | |
| | Name | | | | | | |
| | Number | Street | | | | | |
| | City | | State | ZIP Code | | | |
| 2 | | | | | | | |
| | Name | | | | | | |
| | Number | Street | | | | | |
| | City | | State | ZIP Code | | | |
| 2 | | | | | | | |
| | Name | | | | | | |
| | Number | Street | | | | | |
| | City | | State | ZIP Code | | | |
| _ | | | | | | | |
| | Name | | | | | | |
| | Number | Street | | | | | |
| -2300 | City | | State | ZIP Code | | SHOWER, MALVAS IN COMMAND | |

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| Fill in this in | formation to id | dentify your case: | 个并创放15°C中平第 | |
|---------------------------|------------------|------------------------------------|---------------------------------|---|
| Debtor 1 | | | EXIDAL BOX ST. D. D. | |
| | First Name | Middle Name | Lest Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court | for the: | District of | |
| | | | (State) | |
| Case number (If known) | | | | |
| (II KIIOWII) | | | | ☐ Check if this is a |
| | | | | amended filling |
| Sec - : - 1 = | 400 | | | anoraca illing |
| JTICIAI F | orm 106 | H | | |
| Schodu | lo H. V | our Codebtor | _ | |
| Cileuu | ie n: 1 | our Codeptor | 5 | 12/15 |
| nd number th | e entries in the | suuduv tesponsibje tor siin | DIVING COFFOCT INTOFPRATION | e as complete and accurate as possible. If two married peopl If more space is needed, copy the Additional Page, fill it out, page. On the top of any Additional Pages, write your name an |
| ☐ No | ve any codebt | ors? (If you are filing a joint of | case, do not list either spouse | as a codebtor.) |
| Yes | | | | |
| . Within the | last 8 years, h | nave you lived in a commun | nity property state or territor | ry? (Community property states and territories include |
| | | | , proporty state of territor | y: (Community property states and territories include |

| Yes | | | | |
|------------------------------|---|-------------------------------|--------------------------|---|
| . Within Arizona | the last 8 years, have you live a, California, Idaho, Louisiana, I | ed in a community property | erty state or territory? | (Community property states and territories include |
| No. | Go to line 3. | riorada, rior mexico, r de | ano Rico, Texas, washin | igion, and wisconsin.) |
| | 5. Did your spouse, former spou | use, or legal equivalent live | e with you at the time? | |
| | No | | | |
| | Yes. In which community state | or territory did you live?_ | F | ill in the name and current address of that person. |
| | | | | |
| | Name of your spouse, former spouse, or | r legal equivalent | | |
| | Number Street | | | |
| | <u> </u> | | | |
| | City | State | ZIP Code | |
| | | | | |
| Schedu | | | | |
| | n 1: Your codebtor | | | Column 2: The creditor to whom you owe the d |
| | | | | Column 2: The creditor to whom you owe the d |
| Column | | | havelund | Check all schedules that apply: |
| Column | 1: Your codebtor | c/o Edwa | Bawuah | Check all schedules that apply: Schedule D, line 2, 1 |
| Column | 1: Your codebtor | | Bawuah | Check all schedules that apply: Schedule D, line |
| Column A d Name | 1: Your codebtor | c/o Edwa treet 23 NJ | .Bawuah 07114 | Check all schedules that apply: Schedule D, line 2, 1 |
| Name Number | 1: Your codebtor | c/o Edwa | Bawuah | Check all schedules that apply: Schedule D, line |
| Name Number | 1: Your codebtor | c/o Edwa treet 23 NJ | Bawuah O7114 | Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line |
| Name Number City | 1: Your codebtor | c/o Edwa treet 23 NJ | Bawuah 07/14 | Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line |
| Name Number Number | ljei Bawaah Clifton Si Street | c/o Edwa treet 23 NJ | Bawuah O7114 | Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line |
| Name Number City City | ljei Bawaah Clifton Si Street | c/o Edwa treet 23 NJ | Bawuah ZIP Code | Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line |
| Name Number Number City | ljei Bawaah Clifton Si Street | treet 23 NJ State | 07/14 ZIP Code | Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line |
| Name Number Number City Name | 1: Your codebtor ljei Bawlah Clifton S. Street | treet 23 NJ State | 07/14 ZIP Code | Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule G, line |
| Name Number City City City | ljei Bawaah Clifton Si Street | treet 23 NJ State | 07/14 ZIP Code | Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule G, line |

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| | ur income ossible. If two married p | Last Name Last Name District of (State) (State) | Check if this is: An amended filing A supplement showing postpetition chapter 1 income as of the following date: MM / DD / YYYY |
|---|--|--|--|
| Debtor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the Case number (If known) Difficial Form 1061 Schedule I: You as a complete and accurate as pupplying correct information. If you are separated and your spous parate sheet to this form. On the | Middle Name S: Ur Income ossible. If two married prou are married and not | Last Name District of (State) | An amended filing A supplement showing postpetition chapter 1 income as of the following date: MM / DD / YYYY |
| Case number (If known) Official Form 1061 Schedule I: You as a complete and accurate as pupplying correct information. If you are separated and your spot apparate sheet to this form. On the | ur income ossible. If two married p | District of(State) Complete are filling together (E | An amended filing A supplement showing postpetition chapter 1 income as of the following date: MM / DD / YYYY 12/15 |
| Case number (If known) Official Form 1061 Schedule I: You e as complete and accurate as pupplying correct information. If y you are separated and your sporeparate sheet to this form. On the | ur income ossible. If two married p | (Stale) | An amended filing A supplement showing postpetition chapter 1 income as of the following date: MM / DD / YYYY 12/15 |
| Case number (If known) Official Form 1061 Schedule I: You e as complete and accurate as pupplying correct information. If y you are separated and your sporeparate sheet to this form. On the | ur income ossible. If two married p | (Stale) | An amended filing A supplement showing postpetition chapter 1 income as of the following date: MM / DD / YYYY 12/15 |
| Official Form 1061 Schedule I: You e as complete and accurate as pupplying correct information. If y you are separated and your spot eparate sheet to this form. On the | ossible. If two married p | people are filing together (E | An amended filing A supplement showing postpetition chapter 1 income as of the following date: MM / DD / YYYY 12/15 |
| Bchedule I: You e as complete and accurate as p upplying correct information. If y you are separated and your spon eparate sheet to this form. On the | ossible. If two married p | people are filing together (E | A supplement showing postpetition chapter 1 income as of the following date: MM / DD / YYYY 12/15 |
| Bchedule I: You e as complete and accurate as p upplying correct information. If y you are separated and your spon eparate sheet to this form. On the | ossible. If two married p | people are filing together (E | Income as of the following date: MM / DD / YYYY 12/15 |
| Bchedule I: You e as complete and accurate as p upplying correct information. If y you are separated and your spon eparate sheet to this form. On the | ossible. If two married p | people are filing together (E | 12/15 |
| e as complete and accurate as p upplying correct information. If y you are separated and your spo eparate sheet to this form. On the | ossible. If two married p | eople are filing together (E | |
| eparate sheet to this form. On the | | people are filing together ([| |
| Part 1: Describe Employm | | | use is living with you, include information about your spou on about your spouse. If more space is needed, attach a case number (if known). Answer every question. |
| Fill in your employment information. | | | |
| If you have more than one job, | | Debtor 1 | Debtor 2 or non-filing spouse |
| attach a separate page with information about additional employers. | Employment status | Employed | ☐ Employed |
| Include part-time, seasonal, or self-employed work. | | □ Not employed | □ Not employed |
| Occupation may include student or homemaker, if it applies. | Occupation | Home Healt NCCO Home | h Hide |
| | Employer's name | NCEO HOME | e care, uc |
| | Employer's address | | • |
| | | Number Street | Number Street |
| | | | |
| | | City State | ZIP Code City State ZIP Code |
| i | How long employed ther | re? | |
| rt 2: Give Details About N | Monthly Income | | |
| stimate monthly income as of the pouse unless you are separated. | e date you file this form | . If you have nothing to repo | rt for any line, write \$0 in the space. Include your non-filing |
| you or your non-filing spouse have elow. If you need more space, attac | more then are a | | r all employers for that person on the lines |
| | | | or Debtor 1 For Debtor 2 or |
| List monthly gross wages, salary deductions). If not paid monthly, cal | r, and commissions (befo Iculate what the monthly w | ore all payroll vage would be. 2. | non-filing spouse |
| estimate and list monthly overtime | ne pay. | 3. + \$_ | |
| Calculate gross income. Add line 2 | 2 + line 3. | 4. \$_ | 529) \$ |

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| First Name Middle Name Last Name | | Case number (if knot | wn) |
|--|-----------------------|--|-----------------------------------|
| | | | |
| | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| Copy line 4 here | . → 4. | \$ | \$ |
| 5. List all payroll deductions: | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ | \$ |
| 5b. Mandatory contributions for retirement plans | 5b. | \$ | \$ |
| 5c. Voluntary contributions for retirement plans | 5c. | \$ | \$ |
| 5d. Required repayments of retirement fund loans | 5d. | \$ | \$ |
| 5e. Insurance | 5e. | \$ | \$ |
| 5f. Domestic support obligations | 5f. | \$ | \$ |
| 5g. Union dues | 5g. | \$ | \$ |
| 5h. Other deductions. Specify: | 5h. | +\$ | + \$ |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5 | h. 6. | \$ | \$ |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | <u> 3856</u> | \$ |
| 8. List all other income regularly received: | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | \$ |
| 8b. Interest and dividends | 8b. | \$ | \$ |
| 8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive | dent | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | \$ |
| 8d. Unemployment compensation | 8d. | \$ | \$ |
| 8e. Social Security | 8e. | \$ 1155 | \$ |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | s | · / |
| Specify: | _ 8f. | Ψ | Ψ |
| 8g. Pension or retirement income | 8g. | \$ | \$ |
| 8h. Other monthly income. Specify: | _ 8h. | +\$ | _+\$ |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ 1155 | \$ |
| Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ <u>5011</u> + | s= s_ <u></u> |
| 11. State all other regular contributions to the expenses that you list in Scholnclude contributions from an unmarried partner, members of your household friends or relatives. | | | nmates, and other |
| Do not include any amounts already included in lines 2-10 or amounts that are | e not av | ailable to pay expens | es listed in Schedule J. |
| Specify: | | | 11. 🛨 \$ |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain | e result Statistic | is the combined mon cal Information, if it ap | pplies 12. \$ 30/ |
| 13. Do you expect an increase or decrease within the year after you file this | s form? | | Combined monthly income |
| ■ No. □ Yes. Explain: | | | |
| | | | |

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| Fill in this information to identit | fy your case: | W. 1900 | | |
|---|--|--|--|-----------------------|
| Debtor 1 | | | | |
| First Name Debtor 2 | Middle Name Last Name | Chec | ck if this is: | |
| (Spouse, if filing) First Name | Middle Name Last Name | | n amended filing | |
| United States Bankruptcy Court for the | District of | (State) | supplement showing pos expenses as of the following | stpetition chapter 13 |
| Case number (If known) | | | M / DD / YYYY | ig dato. |
| 06-115 4001 | | | | |
| Official Form 106J | <u>-</u> | | | |
| Schedule J: Yo | ur Expenses | | | 12/15 |
| Be as complete and accurate as p information. If more space is need (if known). Answer every question | ossible. If two married people are filed, attach another sheet to this form. | ling together, both are equ n. On the top of any additi | rally responsible for supply onal pages, write your nam | |
| Part 1: Describe Your Hou | ısehold | | | |
| 1. Is this a joint case? | - | | | |
| No. Go to line 2. Yes. Does Debtor 2 live in a s | separate household? | | | |
| ☐ No | | | | |
| | e Official Form 106J-2, Expenses for S | eparate Household of Debto | or 2. | |
| 2. Do you have dependents? Do not list Debtor 1 and | No D | Dependent's relationship to | Dependent's | Does dependent live |
| Debtor 2. | Yes. Fill out this information for each dependent | Debtor 1 or Debtor 2 | age | with you? |
| Do not state the dependents' names. | | | | No Yes |
| | | | | l Yes □ No |
| | | | | Yes |
| | | | | □ No |
| | | | | ☐ Yes |
| | | | | Yes |
| | | V= | | ☐ No |
| Do your expenses include | | | | ☐ Yes |
| expenses of people other than | ■ No □ Yes | | | İ |
| art 2: Estimate Your Ongoin | g Monthly Expenses | | | |
| stimate your expenses as of your b | ankruptcy filing date unless you are | using this form as a sum | olement in a Chantor 12 co | 22 62 22 24 |
| xpenses as of a date after the bank pplicable date. | ruptcy is filed. If this is a supplemen | tal Schedule J, check the | box at the top of the form | and fill in the |
| clude expenses paid for with non-c | | | | |
| uch assistance and have included it | on Schedule I: Your Income (Officia | ai Form 106i.) | Your expens | ses i |
| The rental or home ownership exp any rent for the ground or lot. | penses for your residence. Include fil | st mortgage payments and | \$ 286 | 1 |
| If not included in line 4: | | | 4. \$ 0.00 | A |
| 4a. Real estate taxes | | | | . = |
| 4b. Property, homeowner's, or rent | er's insurance | | 4a. \$ /NC | - Eng (|
| 4c. Home maintenance, repair, and | | | 4b. \$ 1 NC | L |
| 4d. Homeowner's association or co | | | 4c. \$0 | |
| Official Form 106 (| | | TV. U | |

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| First Name Middle Name Last Name | Case number (# known) |
|--|-----------------------|
| | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans | Tour expenses |
| 6. Utilities: | 5. \$ |
| 6a. Electricity, heat, natural gas | |
| 6b. Water, sewer, garbage collection | 6a. \$ 300 |
| | 6b. \$ 120 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: | 6c. \$ 250 |
| 6d. Other. Specify: | 6d. \$ |
| Childcare and children's education costs | 7. \$ 600 |
| Clothing, laundry, and dry cleaning | 8. \$ 0 |
| Personal care products and services | 9. \$ 85 |
| Medical and dental expenses | 10. \$ 50 |
| | 11. \$ 50 |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | |
| Entertainment, clubs, recreation, newspapers, magazines, and books | 12. \$ <u>250</u> |
| Charitable contributions and religious donations | 13. \$ |
| Insurance. | 14. \$ |
| Do not include insurance deducted from your pay or included in lines 4 or 20. | |
| 15a. Life insurance | |
| 15b. Health insurance | 15a. \$ (|
| 15c. Vehicle insurance | 15b. \$ O |
| 15d. Other insurance. Specify: | 15c. \$ 85 |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 15d. \$ |
| nstallment or lease payments: | 16. \$ |
| 17a. Car payments for Vehicle 1 | |
| 7b. Car payments for Vehicle 2 | 17a. \$ |
| | 17b. \$ <i>O</i> |
| 7c. Other. Specify: | 17c. \$ <i>0</i> |
| OUE DOMBANA OF III | 17d. \$ |
| our payments of alimony, maintenance, and support that you did not report as deducted our pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | d from |
| (a social 1 orin 1001). | ^{18.} \$ |
| ther payments you make to support others who do not live with you. | |
| ecify: | 19. \$ |
| her real property expenses not included in lines 4 or 5 of this form or on Schedule I: Yo | ur Income. |
| - Mongages on other property | 20a. \$ 6 |
| D. Real estate taxes | - 1 |
| : Property, homeowner's, or renter's insurance | 20b. \$U |
| Maintenance, repair, and upkeep expenses | 20c. \$ |
| Homeowner's association or condominium dues | 20d. \$ <i>0</i> |

Debtor 1

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| Debtor 1 | First Name Middle Name Last Name Case | e number (# known) |
|-------------------------------|---|---|
| 21. Other | | 21. +\$ |
| 22a. Ad 22b. Cd | ate your monthly expenses. Id lines 4 through 21. Opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Id line 22a and 22b. The result is your monthly expenses. | 22a. \$ 4707 22b. \$ 0 22c. \$ 4707 |
| 23a. Cc 23b. Cc 23c. Su | ppy line 12 (your combined monthly income) from Schedule I. ppy your monthly expenses from line 22c above. btract your monthly expenses from your monthly income. e result is your monthly net income. | 23a. \$ <u>501</u> 23b\$ <u>4702</u> 23c. \$ <u>309</u> |
| For exam | xpect an Increase or decrease in your expenses within the year after you file this ple, do you expect to finish paying for your car loan within the year or do you expect you payment to increase or decrease because of a modification to the terms of your mortgatexplain here: | |

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| Debtor 1 | GAD Frod | | Frempony-Manso |
|---|------------|-------------|----------------|
| 2000. | First Name | Middle Name | LagOlame |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | | | District of |
| Case number | | | |

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|--|--|
| Did you pay or agree to pay someone who is NOT an at | torney to help you fill out bankruptcy forms? |
| Yes. Name of person | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and |
| | Signature (Official Form 119). |
| | |
| | |
| Under penalty of perjury, I declare that I have read the s that they are true and correct. | summary and schedules filed with this declaration and |
| | |
| * G frempong Manso * | |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date MM / DD / YYYY | Date MM/ DD / YYYY |

| Be as complete information. If | e and accurate as p | ossible. If two marrie | d people are filing | together, both are equally responsible | for supplying correct |
|--|--------------------------|------------------------|--------------------------|---|------------------------------------|
| | | | | iduals Filing for Bank | |
| Official F | | | | | |
| United States E Case number (If known) | 3ankruptcy Court for the | : District | of | | Check if this is an amended filing |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| Debtor 1 | First Name | Middle Name | Last Name | | |
| Fill in this in | nformation to identif | fy your case: | | | |
| Case | 18-23586-VFI | | ed 07/06/18 cument Pa | Entered 07/06/18 12:33:52 age 36 of 52 | Desc Main |

information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No. Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 Debtor 2: **Dates Debtor 2** lived there lived there Same as Debtor 1 Same as Debtor 1 From Number Street City State ZIP Code City State ZIP Code ☐ Same as Debtor 1 Same as Debtor 1 Number From To City State ZIP Code State ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2: Explain the Sources of Your Income

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| Did you have any income from employmer Fill in the total amount of income you receive If you are filing a joint case and you have income No Yes. Fill in the details. | ed from all jobs and all bus | sinesses, including nart-t | ime activities | endar years? |
|--|--|---|--|--|
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions an exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tipsOperating a business | \$ | Wages, commissions, bonuses, tipsOperating a business | \$ |
| For last calendar year: (January 1 to December 31, 207) | Wages, commissions, bonuses, tips□ Operating a business | s 42 410 | Wages, commissions, bonuses, tips Operating a business | \$ |
| For the calendar year before that: (January 1 to December 31, | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ | ☐ Wages, commissions, bonuses, tips☐ Operating a business | \$ |
| Include income regardless of whether that inco unemployment, and other public benefit paymage gambling and lottery winnings. If you are filing | ome is taxable. Examples ents; pensions; rental inc a joint case and you have | of other income are aling ome; interest; dividends; e income that you receive | money collected from laws ed together, list it only once | uite: rovalties: and |
| Include income regardless of whether that incount unemployment, and other public benefit paymagambling and lottery winnings. If you are filing List each source and the gross income from each. | ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. De | of other income are aling ome; interest; dividends; e income that you receive | money collected from laws ed together, list it only once t you listed in line 4. | uite: royalties: and |
| Include income regardless of whether that income unemployment, and other public benefit paymegambling and lottery winnings. If you are filing List each source and the gross income from each of the gross income from e | ome is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. De | of other income are alinome; interest; dividends; e income that you receive not include income that | money collected from laws ed together, list it only once t you listed in line 4. | uite: royaltiee: and |
| Include income regardless of whether that income unemployment, and other public benefit paymers, and other public benefit paymers, and lottery winnings. If you are filing List each source and the gross income from each of the process income from each of the gross income from | ome is taxable. Examples ents; pensions; rental inco a joint case and you have ach source separately. De | of other income are aling ome; interest; dividends; e income that you receive | money collected from laws ed together, list it only once t you listed in line 4. | uite: royalties: and |
| Include income regardless of whether that income unemployment, and other public benefit payment gambling and lottery winnings. If you are filing list each source and the gross income from each source and the gross income from each source. The source are the gross income from each source and the gross income from each source and the gross income from each source and the gross income from each source. So CIAL Security | ome is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. De Debtor 1 Sources of income | Gross Income from each source (before deductions and exclusions) | money collected from laws ed together, list it only once t you listed in line 4. Debter 2 Sources of income | Gross Income from each source (before deductions and exclusions) |
| solude income regardless of whether that income programs and other public benefit payment, and other public benefit payment gambling and lottery winnings. If you are filing site each source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the source and the gross income from each of the gross income from | ome is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. De Debtor 1 Sources of income | Gross Income from each source (before deductions and exclusions) | money collected from laws ed together, list it only once t you listed in line 4. Debter 2 Sources of income Describe below. | Gross Income from each source (before deductions and exclusions) |
| Include income regardless of whether that income unemployment, and other public benefit payment gambling and lottery winnings. If you are filing list each source and the gross income from each source and the gross income from each source. The source are the gross income from each source and the gross income from each source and the gross income from each source and the gross income from each source. So CIAL Security | ome is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. De Debtor 1 Sources of income | Gross Income from each source (before deductions and exclusions) | money collected from laws ed together, list it only once t you listed in line 4. Debter 2 Sources of income Describe below. | Gross Income from each source (before deductions and exclusions) |
| Include income regardless of whether that income unemployment, and other public benefit payment gambling and lottery winnings. If you are filing list each source and the gross income from each source and the gross income from each source. The source are the gross income from each source and the gross income from each source and the gross income from each source and the gross income from each source. So CIAL Security | ome is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. De Debtor 1 Sources of income Describe below. | Gross Income from each source (before deductions and exclusions) \$\[\] | money collected from laws ed together, list it only once to you listed in line 4. Better 2 Sources of Income Describe below. | Gross Income from each source (before deductions and exclusions) |
| Include income regardless of whether that income unemployment, and other public benefit paymers gambling and lottery winnings. If you are filing List each source and the gross income from each source and the gross income from each source. No Yes. Fill in the details. Social Security From January 1 of current year until the date you filed for bankruptcy: | ome is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. De Debtor 1 Sources of income Describe below. | Gross Income from each source (before deductions) (before deductions and exclusions) | money collected from laws ed together, list it only once to you listed in line 4. Debter 2 Sources of income Describe below. | Gross Income from each source (before deductions and exclusions) \$ |
| Include income regardless of whether that income unemployment, and other public benefit payming gambling and lottery winnings. If you are filing List each source and the gross income from each source and the gross income from each source. No Yes. Fill in the details. SOCIAL Security From January 1 of current year until the date you filed for bankruptcy: | ome is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. De Debtor 1 Sources of income Describe below. | Gross Income from each source (before deductions) \$\[\] \$\[\] \$\] \$\[\] \$\] \$\[\] \$\] \$\[\] \$\ | money collected from laws ed together, list it only once to you listed in line 4. Better 2 Sources of Income Describe below. | Gross Income from each source (before deductions and exclusions) \$ |
| Include income regardless of whether that income unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from each of the second source and the | ome is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. De Debtor 1 Sources of income Describe below. | Gross Income from each source (before deductions) \$\[\] \$\[\] \$\] \$\[\] \$\] \$\[\] \$\] \$\[\] \$\] \$\[\ | money collected from laws ed together, list it only once to you listed in line 4. Debter 2 Sources of income Describe below. | Gross Income from each source (before deductions and exclusions) \$ |
| Yes. Fill in the details. SOCIAL SECUVITY From January 1 of current year until the date you filed for bankruptcy: For last calendar year: | ome is taxable. Examples ents; pensions; rental income a joint case and you have ach source separately. De Debtor 1 Sources of income Describe below. | Gross Income from each source (before deductions) \$\frac{1}{3} \frac{1}{3} \f | money collected from laws ed together, list it only once to you listed in line 4. Debter 2 Sources of income Describe below. | Gross Income from each source (before deductions and exclusions) \$ |

Debtor 1

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| P | art 3: | List Certain Payments You Made Before | re You File | d for Bankruptcy | | |
|----|--------|--|-----------------------------------|------------------------------|--|------------------------------------|
| | | | | | | |
| 6. | | ner Debtor 1's or Debtor 2's debts primarily co | | | | |
| | ☐ No. | Neither Debtor 1 nor Debtor 2 has primarily "incurred by an individual primarily for a person | iai, iamily, or | nousenoia purpose." | | 1(8) as |
| | | During the 90 days before you filed for bankrup | otcy, did you p | pay any creditor a total of | \$6,425* or more? | |
| | | ☐ No. Go to line 7. | | | | |
| | | Yes. List below each creditor to whom you total amount you paid that creditor. Do child support and alimony. Also, do no |) not include i | payments for domestic su | nnort obligations, such as | |
| | | * Subject to adjustment on 4/01/19 and every 3 | years after the | nat for cases filed on or at | ter the date of adjustment. | |
| | Yes. | . Debtor 1 or Debtor 2 or both have primarily | | | , | |
| | | During the 90 days before you filed for bankrup | | | 600 or more? | |
| | | No. Go to line 7. | | | , | |
| | | Yes. List below each creditor to whom you p creditor. Do not include payments for a alimony. Also, do not include payments | iomestic sunr | ort obligations, such as c | hild cupport and | |
| | | The water of | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| | | Creditor's Name | | \$ | \$ | ☐ Mortgage |
| | | Creditor's Name | | | | ☐ Car |
| | | Number Street | | | | ☐ Credit card |
| | | | | | | Loan repayment |
| | | =/: | | | | ☐ Suppliers or vendors |
| | | City State ZIP Code | | | | ☐ Other |
| | | to the second and the second s | KANO K. 12-124K MANAGARANGA INSKA | a statulo | TES WITHOUTHOU WAS writed the past of | ser-serizo. con e : si vigoriji e: |
| | | Creditor's Name | | \$ | \$ | ☐ Mortgage |
| | | | | | | Car |
| | | Number Street | | | | Credit card |
| | | | | | | Loan repayment |
| | | | | | | Suppliers or vendors |
| | | City State ZIP Code | | | | Other |
| | | A the empire (Anna Amari at the Anna Amari at the Anna Anna Anna Anna Anna Anna Anna Ann | | PP + ATA (A) I TRANS | THE RESERVE OF THE SECOND OF T | |
| | | | | \$ | \$ | ☐ Mortgage |
| | | Creditor's Name | | | | ☐ Car |
| | | Number Street | | | | Credit card |
| | | | | | | Loan repayment |
| | | · · | | | | Suppliers or vendors |
| | | City State ZIP Code | | | | Other |
| | | | | | | |
| _ | | | | | | į |

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| orporations of which | h you are an office for a business you | r director ner | relatives of any | general partners | ; partnerships of wh | e who was an insider? nich you are a general partner; ng securities; and any managing for domestic support obligations, |
|--|---|----------------|-----------------------|-------------------|----------------------|--|
| 21.1.1 | nents to an insider | | | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| Insider's Name | | | | \$ | \$ | |
| Number Street | | | - | | | |
| City | State | ZIP Code | | | | |
| Insider's Name | | | | \$ | \$ | |
| | | | | | | |
| Number Street | | | 2 2 | | | |
| City | State | ZIP Code | | | | |
| City | you filed for bank | ruptcy, did yo | an insider. Dates of | Total amount | Amount you still | n account of a debt that benefited Reason for this payment |
| City hin 1 year before insider? ude payments on o | you filed for bank | ruptcy, did yo | an insider. | | | |
| city hin 1 year before y insider? lude payments on o No Yes. List all payme | you filed for bank | ruptcy, did yo | an insider. Dates of | Total amount | Amount you still owe | Reason for this payment |
| City hin 1 year before insider? ude payments on o No Yes. List all payme | you filed for bank lebts guaranteed o | ruptcy, did yo | an insider. Dates of | Total amount | Amount you still owe | Reason for this payment |
| City hin 1 year before insider? ude payments on one of the payments of the payme | you filed for bank lebts guaranteed o | ruptcy, did yo | an insider. Dates of | Total amount | Amount you still owe | Reason for this payment |

Debtor 1

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Page 40 of 52 Debtor 1 Case number (# knd Middle Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Nature of the case Court or agency Status of the case fore closure, NJ Superior CT. - ESSEX Case title FNMA v. Galfred Fremping-MAN SO, etals On appeal Number Street ☐ Concluded Case number <u>F 045850 - 13</u> City State ZIP Code Pending Case title Court Name On appeal Number Street Concluded Case number City State **ZIP Code** 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property Creditor's Name Number Street **Explain** what happened Property was repossessed. Property was foreclosed. Property was garnished. City State ZIP Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Number Street **Explain** what happened Property was repossessed. Property was foreclosed.

City

Property was garnished.

Property was attached, seized, or levied.

State

ZIP Code

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| counts or refuse to make a payment be | uptcy, did any creditor, including a bank | or financial institution, set off any | amounts from your |
|--|--|--|--------------------|
| No | source you owed a dept? | | |
| Yes. Fill in the details. | | | |
| | | | |
| | Describe the action the creditor took | Date action was taken | Amount |
| Creditor's Name | | was taken | |
| | | | |
| Number Street | | | \$ |
| | = | | |
| | | | |
| City State ZIP Code | Last 4 digits of account number: XXXX- | | |
| hin 1 year before #1 | | | |
| nin 1 year before you filed for bankrup | tcy, was any of your property in the poss | ession of an assignee for the ben | efit of |
| ditors, a court-appointed receiver, a cu | istodian, or another official? | | |
| Yes | | | |
| _ | | | |
| List Certain Gifts and Contribu | Itione | | |
| | | | |
| No | otcy, did you give any gifts with a total va | | |
| No | Describe the gifts | Dates you gave | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 | | | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | | Dates you gave | Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | | Dates you gave | |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person | | Dates you gave | Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | | Dates you gave | Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | | Dates you gave | Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | | Dates you gave | Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | | Dates you gave | Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street State ZIP Code | | Dates you gave | Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street State ZIP Code | | Dates you gave | Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 | | Dates you gave the gifts | Value \$\$ |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift lumber Street ity State ZIP Code erson's relationship to you ifts with a total value of more than \$600 | Describe the gifts | Dates you gave | Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift lumber Street Stale ZIP Code erson's relationship to you ifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts Dates you gave | Value \$\$ |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts Dates you gave | Value \$\$ |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts Dates you gave | Value \$ Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts Dates you gave | Value \$ Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Berson to Whom You Gave the Gift | Describe the gifts | Dates you gave the gifts Dates you gave | Value \$ Value \$ |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Lumber Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift | Describe the gifts | Dates you gave the gifts Dates you gave | Value \$ Value \$ |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Jumber Street State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Figure 1. The street is the state of more than \$600 per person Figure 2. The street is the state of more than \$600 per person to Whom You Gave the Gift Figure 3. The street is the state of | Describe the gifts | Dates you gave the gifts Dates you gave | Value \$ Value |
| Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift Number Street | Describe the gifts | Dates you gave the gifts Dates you gave | Value \$ Value \$ |

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| First Name Middle Name | Last Name Case number (if known)_ | 2 | |
|--|--|--|------------------------------|
| /ithin 2 years before you filed for bank | ruptcy, did you give any gifts or contributions with a total valu | ue of more than \$ | 500 to any charity? |
| No No | | and the second second second | ve any visality ! |
| Yes. Fill in the details for each gift or o | contribution. | | |
| Gifts or contributions to charities | Parkage Museuma, Espanya (Lutz. 1986) Aura (Lutz. | | flation of |
| that total more than \$600 | Describe what you contributed | Date you contributed | Value |
| | 74 INBOADSHIERANA RELIGIONAL SERVICE S | The second of the second | |
| | | | \$ |
| Charity's Name | | | * |
|) | _ | | \$ |
| | | | |
| Number Street | | | |
| | | | |
| City State ZIP Code | | | |
| | | | |
| 6: List Certain Losses | | | |
| alst Gertain Losses | | | |
| saster, or gambling? No Yes. Fill in the details. | Describe any leaveners reserve for the leave | 1215176 | 1,100 |
| No | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| No Yes. Fill in the details. Describe the property you lost and | Include the amount that insurance has paid. List pending insurance | | |
| No Yes. Fill in the details. Describe the property you lost and | Include the amount that insurance has paid. List pending insurance | | |
| No Yes. Fill in the details. Describe the property you lost and | Include the amount that insurance has paid. List pending insurance | | |
| No Yes. Fill in the details. Describe the property you lost and | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | | |
| No Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Traithin 1 year before you filed for bankrulu consulted about seeking bankrupto | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Insters | loss | lost |
| Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Traithin 1 year before you filed for bankrupt occurred about seeking bankrupt occurred any attorneys, bankruptcy petition possible. | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Insters Insters Insters Introduce the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | loss | \$to anyone |
| 7: List Certain Payments or Traithin 1 year before you filed for bankrupt consulted about seeking bankruptcy bude any attorneys, bankruptcy petition powers. Fill in the details. Payl Gayet. | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Innsfers Introduction of Schedule A/B: Proper | nsfer any property our bankruptcy. Date payment or transfer was | to anyone Amount of payment |
| 7: List Certain Payments or Traithin 1 year before you filed for bankruptcy dude any attorneys, bankruptcy petition payments. No Yes. Fill in the details. Pau G Auel Person Who Was Paid | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Innsfers Introduction of Schedule A/B: Proper | nsfer any property our bankruptcy. Date payment or transfer was | \$to anyone |
| Yes. Fill in the details. Describe the property you lost and how the loss occurred 7: List Certain Payments or Traithin 1 year before you filed for bankru u consulted about seeking bankruptchude any attorneys, bankruptcy petition polytes. Fill in the details. Pau Gauer Person Who Was Paid | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Innsfers Introduction of Schedule A/B: Proper | nsfer any property our bankruptcy. Date payment or transfer was | to anyone Amount of payment |
| 7: List Certain Payments or Traithin 1 year before you filed for bankruptcy dude any attorneys, bankruptcy petition payments. No Yes. Fill in the details. Pau G Auel Person Who Was Paid | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Innsfers Introduction of Schedule A/B: Proper | nsfer any property our bankruptcy. Date payment or transfer was | to anyone Amount of payment |

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| | Last Name | Case number (# known)_ | | |
|--|---|--|-----------------------------------|-----------------------|
| | | | Park Waller | No. 1150-1150 |
| | Description and value of any prope | rty transferred | Date payment or transfer was made | Amount of payment |
| Person Who Was Paid | _ | | | |
| Number Street | - | | - | \$ |
| | - | | | \$ |
| City State ZIP Code | - | | | |
| Email or website address | | | | |
| Person Who Made the Payment, if Not You | - | | | |
| Vithin 1 year before you filed for bankrup promised to help you deal with your cred to not include any payment or transfer that No Yes. Fill in the details. | JILOIS OF TO Make payments to voice o | n your behalf pay or tran reditors? | sfer any property to | o anyone who |
| res. Fill III die details. | Description and value of any propert | y transferred | Date payment or transfer was | Amount of paym |
| Person Who Was Paid | | | made | |
| Number Street | - | | | \$ |
| | | | | \$ |
| City State ZIP Code | _ | U | | |
| lithin 2 years before you filed for bankru | ptcy, did you sell, trade, or otherwis | transfer any property to | anyone, other thar | n property |
| fithin 2 years before you filed for bankru, ansferred in the ordinary course of your clude both outright transfers and transfers to not include gifts and transfers that you had No Yes. Fill in the details. | made as security (such as the granting | | ortgage on your prop | |
| clude both outright transfers and transfers on the include gifts and transfers that you hall No | made as security (such as the granting ave already listed on this statement. Description and value of property | of a security interest or mo | ortgage on your prop | erty). Date transfer |
| clude both outright transfers and transfers on one include gifts and transfers that you hall No. Yes. Fill in the details. | made as security (such as the granting ave already listed on this statement. Description and value of property | of a security interest or mo | ortgage on your prop | erty). Date transfer |
| clude both outright transfers and transfers to not include gifts and transfers that you hat No No Yes. Fill in the details. Person Who Received Transfer | made as security (such as the granting ave already listed on this statement. Description and value of property | of a security interest or mo | ortgage on your prop | erty). Date transfer |
| clude both outright transfers and transfers to not include gifts and transfers that you hat No No Yes. Fill in the details. Person Who Received Transfer Number Street | made as security (such as the granting ave already listed on this statement. Description and value of property | of a security interest or mo | ortgage on your prop | erty). Date transfer |
| clude both outright transfers and transfers on not include gifts and transfers that you hall No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code | made as security (such as the granting ave already listed on this statement. Description and value of property | of a security interest or mo | ortgage on your prop | erty). Date transfer |
| clude both outright transfers and transfers on the include gifts and transfers that you hat the include gifts and transfers that you hat the include gifts and transfers that you hat the include gifts and transfers that you had transfer when the include gifts and transfer with the include gifts and transfers that you had been supported by the include gifts and transfers that you had been supported by the include gifts and transfers and transfe | made as security (such as the granting ave already listed on this statement. Description and value of property | of a security interest or mo | ortgage on your prop | erty). Date transfer |
| Clude both outright transfers and transfers to not include gifts and transfers that you hall No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer | made as security (such as the granting ave already listed on this statement. Description and value of property | of a security interest or mo | ortgage on your prop | erty). Date transfer |

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| | Middle Nam | e Las | st Name | Case number (## | (nown) | |
|---|---|---|--|--|--|---|
| D. Within 10 years be are a beneficiary? No Yes. Fill in the | · (These are | l ed for bankr i often called a | uptcy, did you transfer any prope asset-protection devices.) | erty to a self-settled tru | ıst or similar device of | which you |
| | | | Description and value of the prop | perty transferred | | Date transfer |
| Name of trust | | | | 11,8105, C.511, G. 1/81 | | was made |
| art 8: List Certa | in Financk | al Account | s, Instruments, Safe Deposit | t Boxes, and Storag | e Units | |
| Include checking, | savings, mo | oney market, | cy, were any financial accounts or other financial accounts; cert atives, associations, and other fi | tificates of deposit; sha nancial institutions. | | |
| | | | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| Name of Financial | Institution | | xxxx | Checking | | \$ |
| Number Street | | | | Savings | | |
| | | | | Money market | | |
| City | State | ZIP Code | overcounts and the second of t | ☐ Brokerage ☐ Other | decreases value of all all polytons and a sound of the order of the or | no Tananani va saya . |
| | | | | | | |
| Name of Financial I | Institution | | xxxx | ☐ Checking ☐ Savings | - | \$ |
| Name of Financial I | Institution | | XXXX | ☐ Savings ☐ Money market | | \$ |
| Number Street | | 7ID Code | XXXX | ☐ Savings | | \$ |
| Number Street City Do you now have, or securities, cash, or | State or did you ha other valual | ZIP Code ave within 1 y bles? | XXXX | Savings Money market Brokerage Other | ox or other depository | |
| City Do you now have, or securities, cash, or | State or did you ha other valual | ive within 1 y | | Savings Money market Brokerage Other | | for |
| City Do you now have, or securities, cash, or | State or did you ha other valual etails. | ive within 1 y | rear before you filed for bankrup | Savings Money market Brokerage Other tcy, any safe deposit b | | for Do you still |
| Number Street City Do you now have, o securities, cash, or No Yes. Fill in the de | State or did you ha other valual etails. | ave within 1 y bles? | rear before you filed for bankrup Who else had access to it? | Savings Money market Brokerage Other tcy, any safe deposit b | | Do you still have it? |

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| First Name Middle Name | Last Name | | |
|--|--|---|-------------------------------------|
| | | | |
| ave you stored property in a s | storage unit or place other than your home with | in 1 year before you filed for bankrup | otcy? |
| Yes. Fill in the details. | | | |
| e 105. I ili ili the details. | Michigan Park Company | | |
| | Who else has or had access to it? | Describe the contents | Do you |
| | | | have it? |
| Name of Storage Facility | | | □ No |
| Name of Storage Facility | Name | | ☐ Yes |
| Number Street | | | |
| | Number Street | | |
| | CityState ZIP Code | | |
| | Ony State ZIP Code | | 1 |
| City State | ZIP Code | | |
| | | | |
| 9: Identify Property Y | fou Hold or Control for Someone Else | | |
| o you hold or control any prop | perty that someone else owns? Include any pro | perty you horzowed from are storing | |
| | pio | F Jou Donowed Hom, are Storing | j ior, |
| No | | | |
| Yes. Fill in the details. | | | |
| | Where is the property? | Describe the property | Make |
| | | | Value |
| Owner's Name | | | |
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| ave you notified any governmen | | | |
|---|--|--|---------------------------|
| No Yes. Fill in the details. | | | |
| | Governmental unit | Paradical services and accommod | |
| | and the second | Environmental law, if you know it | Date of notice |
| Name of site | Governmental unit | | - |
| Number Street | Number Street | | |
| | City State ZIP Code | | |
| City State Zil | P Code | | |
| ve you been a party in any judic | ial or administrative proceeding under any | and an area of the second seco | |
| No | or deministrative proceeding under any | environmental law? Include settlemen | ts and orders. |
| Yes. Fill in the details. | | | |
| | Court or agency | Nature of the case | Status of th |
| Case title | | - Arrange-share share and a share and a share sh | case |
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| hin 4 years before you filed for t A sole proprietor or self-em | City State ZIP Code Dur Business or Connections to Any is bankruptcy, did you own a business or have ployed in a trade, profession, or other active | e any of the following connections to a | Conclud |
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| 1: Give Details About You hin 4 years before you filed for a limit of the limit of | City State ZIP Code our Business or Connections to Any I bankruptcy, did you own a business or have ployed in a trade, profession, or other active ty company (LLC) or limited liability partner ging executive of a corporation ne voting or equity securities of a corporat Go to Part 12. and fill in the details below for each busine | e any of the following connections to a vity, either full-time or part-time rship (LLP) on ess. Employer Identification | Conclude any business? |
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Debtor 1

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| Debtor 1 First Name Middle Name Last | Name Case n | umber (if known) |
|---|--|--|
| Business Name | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. |
| Number Street | Name of accountant or bookkeeper | Dates business existed |
| City State ZIP Code | | From To |
| 28. Within 2 years before you filed for bankrup institutions, creditors, or other parties. No Yes. Fill in the details below. | tcy, did you give a financial statement to anyone the statement to any other statement to anyone the statement to anyone the statement to any other statement to anyone the statement to any other | ne about your business? Include all financial |
| Name | MM / DD / YYYY | |
| Number Street | | |
| City State ZIP Code | | |
| Part 12: Sign Below | | |
| | of Financial Affairs and any attachments, and that making a false statement, concealing proresult in fines up to \$250,000, or imprisonment | |
| Signature of Debtor 1 | Signature of Debtor 2 | |
| Date | Date | |
| No Yes | tement of Financial Affairs for Individuals Filir | ng for Bankruptcy (Official Form 107)? |
| Did you pay or agree to pay someone who is | s not an attorney to help you fill out bankruptc | y forms? |
| | At | tach the Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119). |

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| Fill in this information to identify | Docum | | of 52 | .33.32 Desc Main |
|---|----------------------------|--------------------------|-------|---|
| Debtor 1 First Name Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Case number (If known) Dfficial Form 122C-1 | Middle Name Middle Name | Last Name Last Name Of | | Check as directed in times 17 and 21: According to the calculations required by this Statement: 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3). 3. The commitment period is 3 years. 4. The commitment period is 5 years. Check if this is an amended filling |

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

| 1 | 1. What is your marital and filing status? Check one on | y. | | | | |
|----|---|----------------|--------------|----------|----------------------|--|
| | Not married. Fill out Column A, lines 2-11. | | | | | |
| | Married. Fill out both Columns A and B, lines 2-11. | | | | | |
| | Fill in the average monthly Income that you received bankruptcy case. 11 U.S.C. § 101(10A). For example: August 31, if the amount of your monthly income varied the result. Do not include any income amount more than from that property in one column only. If you have nothing | during the 6 | nonths add | the inco | me for all 6 months | |
| • | W. | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
| 2. | Your gross wages, salary, tips, bonuses, overtime, an payroll deductions). | d commissi | ons (before | ali | 5201 | |
| | • | | | | \$ 207] | \$ |
| | All mony and maintenance payments. Do not include pa | yments from | a spouse. | | \$_ <i>O</i> | \$ |
| | All amounts from any source which are regularly paid you or your dependents, including child support. Including an unmarried partner, members of your household, your droommates. Do not include payments from a spouse. Do relisted on line 3. | ide regular co | Intributions | from | ~ | |
| | Net income from operating a business, profession, or farm | Debtor 1 | Bás. a | | \$ | \$ |
| | Gross receipts (before all deductions) | \$ | Debtor 2 | | | |
| | Ordinary and necessary operating expenses | • | Ψ | | | |
| | Net monthly income from a business, profession, or farm | - \$ s | - \$ | Сору | | |
| | Mas I | · · | Ψ | 11010.2 | \$ | \$ |
| | vet income from rental and other real and | Debtor 1 | Debtor 2 | | | |
| 1 | Net income from rental and other real property Gross receipts (before all deductions) | Denior 1 | 20001 2 | | | |
| 1 | Set income from rental and other real property Ordinary and necessary operating expenses | \$ | \$ | | | |

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| | First Name Last Name | Case number (if known) | |
|------|--|---|---|
| Γ | | | |
| | | Debtor 1 D | olumn B ebtőr 2 ör m-filling spouse |
| | 7. Interest, dividends, and royalties | s 0 | & |
| 8 | 3. Unemployment compensation | s 0 | \$ |
| | Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: | | · |
| | For you\$ | | |
| | For your spouse\$ | | |
| 9. | Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. | \$s | |
| 10 | Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. | Ψ <u>΄</u> | |
| | | \$ | |
| | | \$ | |
| | Total amounts from separate pages, if any. | +\$_0+\$_ | |
| 11. | Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. | \$ <u>529</u>] + \$ | 0 = \$5991 |
| | | | Total average |
| 0.1 | | | monthly income |
| Pai | rt 2: Determine How to Measure Your Deductions from Income | | |
| 2. (| Copy your total average monthly income from line 11. | | |
| 3. (| Calculate the marital adjustment. Check one: | | * <u>529)</u> |
| | You are not married. Fill in 0 below. | | , |
| | You are married and your spouse is filing with you. Fill in 0 below. | | |
| | You are married and your spouse is filing with you. Fill in 0 below. | | |
| | Fill in the amount of the income listed in line 11, Column B, that was NOT regularly payou or your dependents, such as payment of the spouse's tax liability or the spouse's you or your dependents. | aid for the household expense support of someone other th | es of an |
| | Below, specify the basis for excluding this income and the amount of income devoted list additional adjustments on a separate page. | to each purpose. If necessar | у, |
| | If this adjustment does not apply, enter 0 below. | | |
| | | • | |
| | | \$ | |
| | | + | |
| | Total | , \$ | |
| | | \$Copy here | → O |
| Yc | our current monthly income. Subtract the total in line 13 from line 12. | | \$ 5291 |
| Ca | lculate your current monthly income for the year. Follow these steps: | | |
| 15a | a. Copy line 14 here → | | . 5291 |
| | Multiply line 15a by 12 (the number of months in a year). | | y 12 |
| 15b | o. The result is your current monthly income for the year for this part of the form, | | \$63492 |
| | | | |

14.

15.

Debtor 1

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| | First Name Middle Name Last Name Case number (if known) |
|--------------------------------------|--|
| 16. Calculate | |
| 16. Calculate | the median family income that applies to you. Follow these steps: |
| loa. Fill in | the state in which you live. |
| 16b. Fill in | the number of people in your household. |
| 16c. Fill in a To find instruc | the median family income for your state and size of household |
| | e lines compare? |
| 17a. Line § 1. | the 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 to 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form)22C-2). 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. or to Part 3 and fill out Calculation of Disposable Income (Official Form)22C-2). On line 39 of that form, copy |
| Part 3: Ca | alculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) |
| 18. Copy your tot | tal average monthly income from the |
| income, copy the | tal average monthly income from line 11 |
| | guernent does not apply, fill in 0 on line 19a. |
| Subtract line 1 | 19a from line 18. |
| . Calculate your | r current monthly income for the year. Follow these steps: |
| 20a. Copy line 1 | 19b |
| | with a year). |
| 20b. The result is | is your current monthly income for the year for this part of the form. |
| 20c. Copy the med | edian family income for your state and size of household from line 16c. |
| How do the lines | \$66284 |
| | ss than line 20c. Unless otherwise ordered by the court and the |
| Line 20b is mo check box 4, 7 | ss than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is ore than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, |
| rt 4: Sign Be | |
| By signing here, | under penalty of perjuny I dealers the residence of the second se |
| x de | under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. |
| Signature of Del | Signature of Debtor 2 |
| Date | |
| MM / DD | /YYYY Date |
| | |
| lf you checked 17a | a, do NOT fill out or file Formt22C-2. b, fill out Formt22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. |

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court

| | | District Of | |
|--------|--------------------|---|-------------|
| I | n re | | |
| | | Case No. | |
| Debtor | | Chapter | |
| | | DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR | |
| 1. | name bank | suant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above sed debtor(s) and that compensation paid to me within one year before the filing of the petition in kruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) semplation of or in connection with the bankruptcy case is as follows: | in |
| | For le | legal services, I have agreed to accept | |
| | Prior | r to the filing of this statement I have received | |
| | | nnce Dues 2000 | |
| 2. | The s | source of the compensation paid to me was: | |
| | ı | Debtor | |
| 3. | The s | source of compensation to be paid to me is: | |
| | - | Debtor Other (specify) | |
| | | - Cast (spools)) | |
| 4. | n | I have not agreed to share the above-disclosed compensation with any other person unless they a members and associates of my law firm. | re |
| | n p | I have agreed to share the above-disclosed compensation with a other person or persons who are members or associates of my law firm. A copy of the agreement, together with a list of the names of people sharing in the compensation, is attached. | nc the |
| 5. | In retu case, i | turn for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptc including: | у |
| | a. A | Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether it is a petition in bankruptcy; | er 1 |
| | b. Pr | Preparation and filing of any petition, schedules, statements of affairs and plan which may be require | d; |
| | c. Re | Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned learings thereof; | |
| | | CERTIFICATION | 1 |
| | | I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. | |
| | | Date Signature of Attorney | |
| | | Name of law firm | |

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Pluese, Becker & Saltzman 20 000 Horizon Way, Ste 900 Mount Laurel, NJ 08054-4318